

THE
Rural District Council

MUTFORD & LOTHINGLAND.

ANNUAL REPORT

OF THE
Medical Officer of Health
For the Year 1913.

LAURENCE GIBSON, M.B., CH.B., D.P.H.

Lowestoft

W. & A. GILFILLAN, 11, QUEEN'S ROAD, LOWESTOFT.

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Summary of Vital Statistics for 1913.



Area of District in acres (excluding water)	28,008
Population (estimated)	...	...	11,339
Gross Births	...	...	297
Nett Births	...	...	290
Birth Rate	...	...	26·19 per 1000
Nett Birth Rate	...	...	25·57 per 1000
Deaths	...	...	153
Death Rate (Recorded)	...	...	13·49 per 1000
Death Rate (Corrected or Standardized)	...	...	11·37 per 1000
Infantile Mortality	...	...	96·55 per 1000 births
Zymotic Death Rate	...	...	0·71 per 1000
Phthisis Death Rate	...	...	1·67 per 1000
Cancer Death Rate	...	...	1·23 per 1000



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH,

FOR THE

Mutford & Lothingland Rural District,

FOR THE YEAR, 1913.

MR. CHAIRMAN AND GENTLEMEN,

I have great pleasure in presenting you with the Annual Report for 1913.

The population of the District has been estimated by a factor supplied by the Registrar General to be 11,339, an increase of 72 on last year.

Where possible I have used the nett births for calculations but in the Sub-Districts this could not be done as particulars of the transferable births are not given in detail.

BIRTH RATE.

297 Births (156 males and 141 females) were registered in the District during the year, giving a gross Birth Rate of 26·192 per 1000 of the estimated population.

From those 297 births have to be deducted 7 (1 legitimate male, 1 legitimate female, 2 illegitimate males and 3 illegitimate females) which are transferred outside your area, as the parents were non-residents, leaving 290 nett births with a nett birth rate of 25·57 per 1000.

The nett number of illegitimate births was 5 (all females) or 1·72 per cent of the total births.

For comparison with previous years the illegitimate birth rate per 1000 of the population was 0·44, the lowest recorded. In 1912 it was 0·71.

In 1911	...	...	...	it was	1·52
1910	...	...	...		0·80
1909	...	...	...		1·53
1908	...	...	...		1·37
1907	...	...	...		1·05
1906	...	...	...		1·75
1905	...	...	...		1·30

Taking the gross illegitimate births which numbered 10 (2 males and 8 females), 5 (1 male and 4 females) took place in the Workhouse, thus the Workhouse was responsible for 50 per cent of the illegitimate births in the District, which is rather below the average, the percentages in previous years being as follows :—

1912	...	...	...	36·36
1911	...	...	...	58·82
1910	...	...	...	80·00
1909	...	...	...	42·10
1908	...	...	...	41·17
1907	...	...	...	76·90
1906	...	...	...	59·69
1905	...	...	...	77·70

The percentage of those children born in the District excluding the Workhouse was 50.

In 1912	...	...	It was	63·63
1911	...	...	...	41·10
1910	...	...	...	20·00
1909	...	...	...	57·89
1908	...	...	...	58·82
1907	...	...	...	23·07
1906	...	...	...	40·60

Of those born in the District 4 (1 male and 3 females) were in the Oulton Broad Sub-District and 1 female in the Belton Sub-District.

The legitimate births were distributed as follows:—185 (101 males and 84 females) in the Oulton Broad Sub-District, 99 (51 males and 48 females) in the Belton Sub-District and 3 (2 males and 1 female) in the Workhouse.

The birth rate for England and Wales in 1913 was 23·9.

TABLE OF BIRTHS AND RATES PER 1000.

<i>Year.</i>	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>	<i>Rate.</i>	<i>Rate for England & Wales.</i>
1905	151	161	312	25·42	27·21
1906	163	157	320	26·07	27·00
1907	143	144	287	23·11	26·10
1908	175	167	342	27·64	26·5
1909	162	154	316	25·54	25·6
1910	135	157	292	23·60	24·8
1911	132	168	300	26·82	24·4
1912	140	118	258*	22·90*	23·8
1913	153	137	290*	25·57*	23·9

* Nett.

BELTON SUB-DISTRICT.

<i>Year.</i>	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>	<i>Rate per 1000.</i>
1906	50	38	88	21·09
1907	42	33	75	17·83
1908	46	44	90	21·40
1909	54	37	91	21·64
1910	46	54	100	23·78
1911	46	38	84	22·27
1912	49	27	76*	20·01*
1913	51	49	100*	26·16*

* Gross.

OULTON BROAD SUB-DISTRICT.

<i>Year.</i>	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>	<i>Rate per 1000.</i>
1906	113	119	232	28·64
1907	101	111	212	25·95
1908	129	123	252	30·85
1909	108	117	225	27·54
1910	89	103	192	23·50
1911	88	128	216	29·13
1912	93	94	187*	25·04*
1913	105	92	197*	26·22*

* Gross.

The Average Yearly Birth rate for England and Wales for the nine years 1905—1913 was 25·48 ; that for your District was 25·19 or 0·29 per 1000 less.

The Average Yearly Illegitimate Birth rate of the District for the last eight years was 1.25 per 1000 ; in 1913 it was 0·44—that is 0·81 less, but being calculated on the nett births makes the improvement more marked than it really is.

DEATH RATE.

175 Deaths were registered in the District (96 males and 79 females) giving a crude death rate of 15·43 per 1000 of the estimated population.

Of those 175 deaths, have to be deducted 38 (22 males and 16 females) who were non-residents and are transferred elsewhere leaving 137 (74 males and 63 females), but to this figure must be added 16 (7 males and 9 females) who were residents but being registered in other Districts were transferred back here which gives a nett total of 153 (82 males and 71 females) and a nett death rate of 13·49 per 1000 of the estimated population.

The Standardized or Corrected Death rate being 11·37 per 1000.

The Corrected Death rate for England and Wales for 1913 was 13·4 per 1000 being 2·03 higher than your District

Of those deaths 47 (22 males and 25 females) belonged to the Belton Sub-District and 106 (60 males and 46 females) belonged to the Oulton Broad Sub-District.

49 (32 males and 17 females) were in persons age 65 years and upwards and constitute 32 per cent of the total which is lower than usual.

In 1908	...	...	...	it was	38·12
1909	...	...	...	...	33·30
1910	...	...	...	...	42·51
1911	...	...	...	...	43·57
1912	...	...	...	...	44·27

Out of those deaths in persons aged 65 years and upwards 41 (27 males and 14 females) were aged 70 years and upwards ; 83·67 per cent of those deaths.

In the Oulton Broad Sub-District 12 males died between the ages 70 and 80, at 70 (2), 71 (2), 73 (2), 74 (2), 75, 76, 77 and 78 and 4 females at 72, 74 (2) and 79 ;

9 males, at 80 (3), 81, 82, 83 (2), 84 (2) and 2 females at 83 and 84. 1 male at 90 and 1 female at 96.

In the Belton Sub-District 3 males at 70, 73 and 77, and 6 females at 72 (2), 73, 74, 75 and 79.

2 males aged 80 and 1 female aged 86.

28 deaths took place in children under 1 year of age (14 males and 14 females) 2 more than last year and 5 more than 1910 which was the lowest.

The Infantile Mortality Rate was 96·55 per 1000 nett births registered: in 1912 it was 100·78 and 1910 was lowest with 78·76.

The Infantile Mortality Rate for England and Wales for 1913 was 109.

10 Inquests were held on residents.

1 death at Mutford was uncertified.

Enteric Fever caused 2 deaths, Whooping Cough 2, Diphtheria 1 and Scarlet Fever 3, giving a total of 8 deaths from Zymotic diseases or a Zymotic Death Rate of 0·71 per 1000 the same as last year.

The Death Rate from Enteric Fever was 0·176

„ „ „ Scarlet Fever 0·264

„ „ „ Diphtheria 0·088

„ „ „ Whooping Cough 0·176

Phthisis and other Tuberculous Diseases caused 19 deaths, giving a Death rate of 1·67 which is higher than usual.

Cancer or Malignant Diseases caused 14 deaths, giving a death rate of 1·23 which is higher than usual.

Pneumonia caused 13 deaths, Heart Disease 12, Bronchitis 6, Influenza 3, Kidney Disease 6, Diabetes 6, Accidents 6, Suicides 2.

The Average Yearly Death rate for England and Wales from 1905—1913 was 14·39 : in your District it was 11·59 or 2·8 per 1000 lower.

TABLE SHOWING MORTALITY
from all causes at different periods of life.

The Whole District.

<i>Age.</i>				<i>Males.</i>	<i>Females.</i>	<i>Total.</i>		
Under 1 year	...	...	...	14	14	28
1 year and under 2 years			...	2	2	4		
2 years	„	5	„	...	—	2		
5	„	„	15	„	...	4	7	11
15	„	„	25	„	...	5	2	7
25	„	„	45	„	...	9	13	22
45	„	„	65	„	...	15	14	29
65 years and upwards			...	32	17	49		
Age unknown		...	...	1	—	1

TABLE SHOWING MORTALITY RATE PER 1000.

**From all causes—from Phthisis and other Tubercular Diseases—
from Cancer or Malignant Diseases.**

<i>Year.</i>	<i>From all Causes.</i>		<i>Phthisis and other Tubercular Diseases.</i>	<i>Cancer Malignant Diseases.</i>
	<i>England and Wales.</i>	<i>Mutford & Lothing- land Rural District.</i>		
1905	15·22	11·65	1·22	1·22
1906	15·40	12·63	0·40	0·91
1907	14·98	12·28	1·05	1·21
1908	14·70	11·23	1·13	0·56
1909	14·50	10·75	0·64	0·64
1910	13·40	10·26	0·88	0·72
1911	14·60	12·51	1·25	0·89
1912	13·30	11·63	0·79	1·24
Average 1905-12	14·5	11·62	0·92	0·92
1913	13·40	11·37	1·67	1·23

ZYMOTIC DEATH RATE per 1000.
From Zymotic Diseases.

Year,	From All	Scarlet Fever.	Diphth- eria.	Measles.	Diarrhœa	Whoop- ing Cough.	Fever.
1905	0·57	0·00	0·08	0·00	0·16	0·32	0·00
1906	0·65	0·00	0·16	0·16	0·32	0·00	0·00
1907	1·13	0·08	0·00	0·32	0·24	0·40	0·07
1908	0·56	0·16	0·00	0·00	0·16	0·08	0·16
1909	0·48	0·00	0·16	0·08	0·00	0·16	0·08
1910	0·24	0·00	0·16	0·00	0·08	0·00	0·00
1911	0·71	0·08	0·08	0·00	0·26	0·17	0·03
1912	0·71	0·00	0·18	0·18	0·09	0·18	0·09
Average from 1905-12	0·63	0·04	0·10	0·09	0·16	0·16	0·06
1913	0·71	0·26	0·09	0·00	0·00	0·18	0·18

BELTON REGISTRATION SUB-DISTRICT.

47 Deaths (22 males and 25 females) were allocated to this Sub-District.

The Death rate was 12·30 per 1000 of the population which is estimated to be 3822.

In 1912	it was	11·85
1911		12·46
1910		11·65
1909		9·75
1908		10·01
1907		10·15
1906		13·80

15 of those deaths (6 males and 9 females) were in persons aged 65 years and upwards, 31·91 per cent of the total deaths, 12 of the 15 (5 males and 7 females) were aged 70 years and upwards. 3 males died at ages 70, 73 and 77, 6 females at ages 72 (2), 73, 74, 75 and 79.

2 males aged 80 and 1 female aged 86.

11 children died under 1 year of age (6 males and 5 females)
The Infantile Mortality Rate was 110 per 1000 births registered as compared with 118·4 last year.

2 Inquests were held as compared with 4 last year.

Phthisis and other Tubercular Diseases caused 4 deaths giving a death rate of 1·05 per 1000, which is above the average (*see table*).

Cancer (Malignant Diseases) caused 4 deaths giving a death rate of 1·05, which is the same as last year.

There were 2 deaths from Zymotic Diseases, 1 from Enteric Fever and 1 from Whooping Cough.

The Zymotic Death rate was 0·52 per 1000, that from each disease being 0·26.

Pneumonia caused 3 deaths, Nephritis 3, Heart Disease 2, Bronchitis 2, Appendicitis 2, Accident 1 and Suicide 1.

BELTON SUB-DISTRICT.

TABLE SHOWING MORTALITY

From all causes at different periods of life.

<i>Age.</i>				<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Under 1 year	...	...	...	6	5	11
1 year and under 2 years	...	...	...	0	0	0
2 years	„ 5	„	...	0	1	1
5 „	„ 15	„	...	0	3	3
15 „	„ 25	„	...	2	0	2
25 „	„ 45	„	...	1	4	5
45 „	„ 65	„	...	7	3	10
65 and upwards	...	...	...	6	9	15
				—	—	—
Totals				22	25	47

BELTON SUB-DISTRICT TABLE OF MORTALITY RATES PER 1,000.

From all causes—from Phthisis and other Tubercular Diseases
and from Cancer (Malignant Diseases).

Year	From all causes	Phthisis and other Tubercular Diseases	Cancer (Malignant Diseases)
1906	13·80	0·47	1·19
1907	10·15	0·72	0·96
1908	10·01	0·71	0·23
1909	9·75	0·00	1·18
1910	11·65	0·43	0·95
1911	12·46	1·06	1·32
1912	11·85	0·26	1·05
Average from 1906–12 1913	11·38	0·52	0·98
	12·30	1·05	1·05

ZYMOTIC DEATH RATE. From the principal Zymotic Diseases.

Year	From all	Scarlet Fever	Diphtheria	Diarrhoea	Measles	Fever	Whoop- ing Cough
1906	0·96	0·00	0·00	0·48	0·48	0·00	0·00
1907	0·96	0·00	0·00	0·24	0·00	0·24	0·48
1908	0·23	0·00	0·00	0·00	0·00	0·23	0·00
1909	0·47	0·23	0·00	0·00	0·23	0·00	0·00
1910	0·23	0·00	0·00	0·23	0·00	0·00	0·00
1911	1·06	0·00	0·26	0·26	0·00	0·26	0·26
1912	0·53	0·00	0·26	0·00	0·00	0·26	0·00
Average from 1906–12 1913	0·63	0·03	0·07	0·17	0·10	0·14	0·10
	0·52	0·00	0·00	0·00	0·00	0·26	0·26

PARISH MORTALITY RATE.

ASHBY. 1 female aged 80 died from Senile Decay.
The death rate was 9.17 against the average 10.51.

BELTON. 8 deaths (4 males and 4 females).

Males—1 male aged 24 died from Diabetes also 1 aged 73, 1 aged 77 and 1 aged 80 from Senile Decay.

Females—1 aged 5 months from Convulsions, 1 aged 14 from Appendicitis, 1 aged 56 from Cancer and 1 aged 73 from Senile Decay.

The death rate from all causes was 9.29 against the average 11.55.

That from Cancer 1.16 against the average 0.57.

BRADWELL. 8 deaths (4 males and 4 females).

Males—1 aged 3 days from Premature Birth, 1 aged 37 from Phthisis, 1 aged 58 and 1 aged 62 from Nephritis.

Females—1 aged 6 months from Convulsions, 1 aged 11 from Tuberculosis, 1 aged 48 from Diabetes and 1 aged 86 from Senile Decay.

The death rate from all causes was 13.20 against the average 12.48.

That from Phthisis and Tubercular Diseases 3.30 against the average 1.01.

BURGH CASTLE. 4 deaths (2 males and 2 females).

A male and a female child died in 5 minutes from Premature Birth, a female aged 57 from Cancer and a male age 63 from Hæmatemesis.

The death rate from all causes was 7.46 against the average 12.56.

That for Cancer 1.87 against the average 1.93.

FRITTON. 5 deaths (2 males and 3 females).

Males—1 aged 3 days from Debility and 1 aged 70 from Concussion the result of being knocked down by a bicycle, on this case an inquest was held.

Females—1 aged 72 from Senile Decay, 1 aged 74 from Broncho-pneumonia and 1 aged 75 from Cerebral Thrombosis.

The death rate from all causes was 21.74 against the average 7.77.

No deaths from Phthisis or Cancer.

HERRINGFLEET.—1 female aged 68 died from Bronchitis making a death rate of 3·50 against the average 13·03.

HORTON. 5 deaths (4 males and 1 female).

Males—1 died just after birth from Inanition, 1 aged 4 months from Bronchitis, 1 aged 59 from Enteric Fever and 1 aged 76 from Vesical Calculus.

The *Female* aged 6 died from Appendicitis.

The death rate from all causes was 16·23 against the average 7·55.

No deaths from Phthisis or Cancer.

LOUND. 4 death (1 male and 3 females).

The *Male* aged 6 from Broncho-pneumonia.

Females—1 aged 9 months from Convulsions, 1 aged 2 from Whooping Cough and 1 aged 79 from Senile Decay.

The death rate from all causes was 11·33 against the average 11·31.

No deaths from Cancer or Phthisis.

SOMERLEYTON. 11 deaths (4 males and 7 females).

Males—1 aged 17 from Phthisis, 1 aged 56 from Nephritis, 1 aged 59 from Heart Disease and 1 aged 60 on whom an inquest was held from "Suicide by prussic acid whilst of unsound mind."

Females—1 aged 3 months from Broncho-pneumonia, 1 aged 30 from Phthisis, 1 aged 32 from Cerebral Thrombosis, 2 aged 44 from Cancer, 1 aged 57 from Heart Disease and 1 aged 72 from Gastritis.

The death rate from all causes was 20·64 against an average 11·86.

That from Cancer 3·75 against the average 0·68.

That from Phthisis 3·75 against the average 0·47.

BELTON SUB-DISTRICT.

Parish Mortality Rate per 1000. Comparison between 1913 and the last 8 Years.

Year.	Ashby.	Belton.	Bradwell.	Burgh-Castle.	Pritton.	Herringfleet	Hopton.	Lound.	Somerleyton.
1905	0.00	13.50	6.30	6.70	20.60	18.00	2.70	17.50	12.0
1906	9.34	13.50	18.92	18.45	10.30	9.83	19.36	9.80	8.57
1907	9.34	6.60	10.87	11.74	0.00	10.40	2.73	15.60	19.80
1908	28.03	9.90	12.42	13.42	3.44	17.36	8.15	5.01	6.60
1909	9.34	8.80	17.08	6.71	0.00	13.38	8.19	10.02	8.25
1910	9.34	14.30	10.86	13.42	10.34	3.47	8.19	12.53	13.20
1911	18.69	12.94	11.70	15.12	4.40	17.73	9.86	11.49	11.40
1912	0.00	12.85	11.62	14.92	13.10	14.08	3.26	8.54	15.09
Average from 1905-1912	10.51	11.55	12.48	12.56	7.77	13.03	7.55	11.31	11.86
1913	9.17	9.29	13.20	7.46	21.74	3.50	16.23	11.33	20.64

PARISH MORTALITY RATE PER 1000.

From Phthisis and other Tuberculous Diseases.

Year.	Ashby.	Belton.	Bradwell.	Burgh- Castle.	Fritton.	Herringfleet	Hopton,	Lound.	Somer- leyton.
1905	0.00	2.20	3.30	0.00	0.00	6.50	0.00	0.00	0.00
1906	0.00	0.00	1.67	0.00	0.00	0.00	0.00	0.00	0.00
1907	0.00	1.10	1.57	1.67	0.00	0.00	0.00	0.00	0.00
1908	0.00	1.10	1.55	0.00	0.00	3.47	0.00	0.00	0.00
1909	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1910	0.00	0.00	0.00	1.67	0.00	0.00	2.73	0.00	0.00
1911	0.00	1.17	0.00	1.89	0.00	3.54	0.00	0.00	1.90
1912	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.88
.....									
Average from 1905-1912	0.00	0.70	1.01	0.65	0.00	1.69	0.34	0.00	0.47
1913	0.00	0.00	3.30	0.00	0.00	0.00	0.00	0.00	3.75

PARISH MORTALITY RATE PER 1000.

From Cancer (Malignant Diseases).

Year.	Ashby.	Belton.	Bradwell.	Burgh Castle.	Fritton.	Herringfleet	Hopton.	Lound.	Somer- leyton.
1905 ...	0.00	2.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1906 ...	0.00	0.00	3.15	3.35	0.00	0.00	2.76	0.00	0.00
1907 ...	0.00	0.00	1.55	5.01	0.00	0.00	0.00	0.00	0.00
1908 ...	0.00	0.00	0.00	0.00	0.00	3.47	0.00	0.00	0.00
1909 ...	0.00	0.00	1.55	1.67	0.00	6.94	0.00	0.00	1.65
1910 ...	0.00	0.00	4.65	1.67	0.00	0.00	0.00	0.00	0.00
1911 ...	0.00	2.35	0.00	0.00	0.00	3.54	3.28	0.00	1.90
1912 ...	0.00	0.00	0.00	3.73	0.00	3.52	0.00	0.00	1.88
Average from 1905-1912	0.00	0.57	1.36	1.93	0.00	2.18	0.75	0.00	0.68
1913 ...	0.00	1.16	0.00	1.87	0.00	0.00	0.00	0.00	3.75

OULTON BROAD SUB-DISTRICT.

106 deaths (60 males and 46 females) were allocated to this Sub-District, 20 more than in 1912, giving a Death rate of 14·65 per 1000 of the estimated population.

In 1912	...	it was	11·52
1911	...	...	12·54
1910	...	...	9·55
1909	...	...	11·38
1908	...	...	11·75
1907	...	...	10·33
1906	...	...	11·76

34 (26 males and 8 females) were in persons aged 65 years and upwards, 32·07 per cent of the total which is lower than last year when it was 38·37 per cent.

Of those 34 deaths 29 (22 males and 7 females) were in persons aged 70 years and upwards.

Between 70 and 80 there were 12 males aged 70 (2), 71 (2), 73 (2), 74 (2), 75, 76, 77 and 78 and 4 females aged 72, 74 (2) and 79.

Between 80 and 90 there were 9 males aged 80 (3), 81, 82, 83 (2) and 84 (2) and 2 females aged 83 and 84.

1 male died aged 90 and 1 female aged 96.

17 of the deaths (8 males and 9 females) were in infants under 1 year of age, 16·04 per cent of the total which is lower than last year when it was 19·77 per cent.

The Infantile Mortality rate was 89·95 per 1000, which is slightly lower than last year when it was 90·91.

6 deaths were due to Zymotic Diseases, 1 from Enteric Fever, 3 from Scarlet Fever, 1 from Diphtheria, and 1 from Whooping Cough, giving a Zymotic Death rate of 0·83 per 1000.

The death rate from Scarlet Fever was 0·41 and from Enteric Fever, Diphtheria and Whooping Cough it was 0·14 for each.

Phthisis and other Tuberculous Diseases caused 15 deaths, giving a Death rate of 2·07, last year it was 1·07.

Cancer (Malignant Disease) caused 10 deaths with a Death rate of 1·38, last year it was 1·39.

8 Inquests were held.

Five persons met with violent deaths and 1 committed Suicide by drowning whilst of unsound mind.

10 died from Heart Disease and 10 from Pneumonia, 4 from Bronchitis, 3 from Influenza and 3 from Kidney Disease and 1 from Puerperal Fever.

One death was uncertified.

TABLE SHOWING MORTALITY,
In the Oulton Broad sub-district from all causes at different age
periods.

Age.	Males.	Females.	Total,
Under 1 year	8	9	17
1 year and under 2 years	2	2	4
2 „ „ 5 „	0	1	1
5 „ „ 15 „	4	4	8
15 „ „ 25 „	3	2	5
25 „ „ 45 „	8	9	17
45 „ „ 65 „	8	11	19
65 years and upwards	26	8	34
Age unknown	1	—	1
	60	46	106

TABLE OF MORTALITY RATES per 1000.
From all causes—from Phthisis and other Tubercular Diseases
and from Cancer (Malignant Disease).

Year.	All Causes.	Phthisis and other Tubercular Diseases.	Cancer (Malignant Disease).
1906	11·76	0·36	0·72
1907	10·33	1·21	1·33
1908	11·75	1·34	0·73
1909	11·38	0·97	0·36
1910	9·55	1·10	0·61
1911	12·54	1·34	0·67
1912	11·52	1·07	1·39
Average from 1906–12	11·26	1·05	0·83
1913	14·65	2·07	1·38

OULTON BROAD SUB-DISTRICT ZYMOTIC DEATH RATE

From the principal Zymotic Diseases.

Year	From all	Scarlet Fever	Diphtheria	Dysentery	Measles	Fever	Whooping Cough
1906	0.48	0.00	0.24	0.24	0.00	0.00	0.00
1907	1.21	0.12	0.00	0.24	0.48	0.00	0.36
1908	0.73	0.24	0.00	0.24	0.00	0.12	0.12
1909	0.31	0.00	0.12	0.00	0.00	0.12	0.24
1910	0.24	0.00	0.24	0.00	0.00	0.00	0.00
1911	0.65	0.13	0.00	0.39	0.00	0.00	0.13
1912	0.80	0.00	0.13	0.13	0.27	0.00	0.27
Average from 1906-12	0.63	0.07	0.10	0.18	0.11	0.03	0.16
1913	0.83	0.41	0.14	0.00	0.00	0.14	0.14

OULTON BROAD SUB-DISTRICT. PARISH MORTALITY RATE.

BLUNDESTON. 13 deaths (9 males and 4 females).

Males—1 aged 2 months died from Whooping Cough, 1 aged 5 months from Broncho pneumonia, 1 aged 11 from Scarlet Fever, 1 at Scarboro' aged 37 from Pneumonia, 1 aged 56 on whom an Inquest was held, died from a fractured Skull due to an accidental fall, 2 aged 74, 1 from Phthisis and 1 from Senile Decay, 2 from Senile Decay aged 76 and 82.

Females—1 aged 21 months from Cancer, 1 aged 10 at Colchester from Pneumonia, 1 aged 21 from Phthisis and 1 at Woodbridge aged 37 from Phthisis.

The death rate was 18.49 against the average 13.53, that from Phthisis 4.27 against the average 0.46, that from Cancer 1.42 against the average 1.32.

CORTON. 4 deaths (3 males and 1 female).

Males—1 aged 21 died from Scarlet Fever at Blyth, 1 aged 68 from Heart Disease and 1 aged 70 from Cerebral Hæmorrhage.

The *Female* aged 41 died from Pneumonia.

The death rate was 7.23 against the average 9.92.

No deaths from Cancer or Phthisis.

FLIXTON. 3 deaths (all males).

1 aged 70 from Heart Disease, 1 aged 73 from Cancer and 1 aged 83 from Senile Decay.

The death rate was 38·96 against the average 9·73.

That from Cancer was 12·99 against the average 0·00.

GUNTON. 1 death, a male aged 78 from Heart Disease, giving a death rate of 14·92 against the average 7·34.

OULTON. 5 deaths (3 males and 2 females).

Males—1 aged 57 from Phthisis, 1 aged 68 from Erysipelas, and 1 aged 84 from Senile Decay.

Females—1 illegitimate child aged 1 month from Premature Birth and 1 aged 68 from Bronchitis.

The death rate was 11·63 against the average 10·78.

That from Phthisis 2·33 against the average 1·63.

BARNBY. 2 deaths both males, 1 aged 16 days from Gastritis and 1 on whom an Inquest was held, died from an accident in a mill.

The death rate was 6·39 against the average 8·42.

No deaths from Phthisis or cancer.

CARLTON COLVILLE. 11 deaths (6 males and 5 females).

Males—1 aged 13 on whom an Inquest was held, died from blood poisoning after an accident, 1 aged 25 from Phthisis, 1 aged 69 from Cancer, 1 aged 75 from Diabetes, 1 aged 83 from Senile Decay and 1 aged 84 from Bronchitis.

Females—1 aged 5 months from Abdominal Tuberculosis, 2 aged 10 hours from Premature Birth, 2 aged 56, 1 from Influenza and 1 from Heart Disease.

The death rate was 16·84 against the average 12·88.

That from Cancer 1·53 against the average 1·20 and that from Phthisis and other forms of Tuberculosis was 3·06 against the average 1·94.

GISLEHAM. 6 deaths (4 males and 2 females).

Males—1 aged 20 from Phthisis, 1 on whom an Inquest was held at Grimsby, aged 29 was drowned, 1 aged 80 from Heart Disease and 1 aged 81 from Arteriosclerosis.

Females—1 aged 8 from Diphtheria and 1 aged 74 from Cerebral Hæmorrhage.

The death rate was 15·79 against the average 10·22.

That from Phthisis 2·63 against the average 1·03.

KESSINGLAND. 27 deaths (10 males and 17 females).

Males—1 aged 12 hours from Premature Birth, 1 aged 11 days from Inanition, 1 aged 22 months from Pneumonia, 1 on whom an Inquest was held, died aged 14 from Pneumococcal Meningitis, 1 on whom an Inquest was held, aged 27 committed Suicide by drowning, 1 aged 57 from Pneumonia, 1 aged 60 from Nephritis, 1 aged 63 from Bronchitis, 1 aged 73 and 1 aged 80 from Cancer.

Females—1 aged 7 hours and 1 aged 3 days from Premature Births, 1 aged 2 months from want of Milk, 1 aged 14 years from Scarlet Fever, 1 aged 21 and 1 aged 26 from Phthisis, 1 aged 25 from Pneumonia, 1 aged 31 from Diabetes, 1 aged 44 and 1 aged 46 from Cancer, 3 aged 63 79 and 83 from Cerebral Hæmorrhage, 1 aged 72 from Nephritis, 1 aged 84 from Pneumonia, and 2 aged 62 and 96 from Senile Decay.

The death rate was 14·44 against the average 12·49.

That from Cancer 2·14 against the average 0·97

That from Phthisis 1·07 against the average 1·28.

MUTFORD. 3 deaths (1 male and 2 females).

The male aged 71 died from Phthisis.

Females—1 aged 2 months died from Broncho Pneumonia (uncertified), and 1 an illegitimate child aged 13 months died from Convulsions.

The death rate was 7·35 against the average 10·69.

That from Phthisis was 2·45 against the average 0·56.

RUSHMERE. 1 death, a male aged 77 from Heart Disease.

The death rate was 6·17 against the average 10·39.

No deaths from Phthisis or Cancer.

PAKEFIELD. 30 deaths (17 males and 13 females).

Males—2 aged 2 days (1 was illegitimate) and 1 aged 3 weeks from Premature Birth, 1 aged 7 months from Inanition, 1 aged 13 months from Bronchitis, 1 aged 26 from Phthisis, 1 aged 27 from Cerebral Hæmorrhage, 1 aged 33 from Diabetes, 1 aged 38 on whom an Inquest was held, died from a fractured skull the result of an accidental fall, 2 aged 57 and 68 from Cancer, 3 aged 55, 59 and 71 from Heart Disease, 1 aged 80 from Cerebral Apoplexy, 1 aged 90 from Influenza and 1 on whom an Inquest was held, age unknown, was "found dead on Pakefield Beach," there was nothing to show that this was a native of Pakefield.

Females—1 aged 8 months from Broncho Pneumonia, 1 aged 2 years from Intussusception, 1 aged 14 from Nephritis, 1 aged 31 from Puerperal Septicaemia, 4 from Phthisis aged 29, 52, 53 and 62, 1 aged 39 from Enteric Fever (this case was diagnosed too late for notification), 1 aged 52 from Influenza, 1 aged 53 from Cancer, 1 aged 54 from Heart Disease and 1 aged 74 from Intestinal Obstruction.

The death rate was 18·52 against the average 13·66

That from Phthisis 3·09 against the average 1·13, and that for Cancer 1·85 against the average 0·79.

OULTON BROAD SUB-DISTRICT.

Parish Mortality Rate per 1000. Comparison between 1913 and the last 8 Years.

Year	Blundeston	Corton	Flixton	Gunton	Oulton	Barnby	Carlton Colville	Gisleham	Kessingland	Mutford	Rushmere	Pakefield
1905 ...	14.90	13.70	10.30	19.50	15.80	2.90	16.80	14.00	9.80	9.00	6.40	13.00
1906 ...	17.43	16.84	0.00	0.00	9.07	17.29	15.40	8.40	13.94	4.51	19.35	8.72
1907 ...	14.93	7.65	10.30	0.00	14.84	5.76	18.10	14.00	16.50	4.51	6.45	15.45
1908 ...	14.94	4.59	10.30	19.60	6.43	8.65	8.30	5.60	16.00	15.71	12.90	13.34
1909 ...	17.43	4.59	20.60	0.00	8.49	2.88	8.35	14.00	12.50	13.56	6.45	13.35
1910 ...	9.96	4.59	0.00	19.60	12.73	20.17	11.14	5.60	6.50	13.54	12.90	11.12
1911 ...	11.52	14.65	0.00	0.00	11.81	9.70	17.08	10.66	9.64	12.40	12.50	18.14
1912 ...	7.15	12.73	26.32	0.00	7.04	0.00	7.70	7.94	15.06	12.32	6.21	16.15
Average from 1905-1912	13.53	9.92	9.73	7.34	10.78	8.42	12.88	10.22	12.49	10.69	10.39	13.66
1913 ...	18.49	7.23	38.96	14.92	11.63	6.39	16.84	15.79	14.44	7.35	6.17	18.52

OULTON BROAD SUB-DISTRICT.

Parish Mortality Rate per 1000 From Phthisis and other Tuberculous Diseases.

Year	Blundeston	Corton	Flixton	Gunton	Oulton	Barnby	Carlton Colville	Gisleham	Kessingland	Mutford	Rushmere	Pakefield
1905 ...	1.20	1.50	0.00	0.00	2.20	0.00	1.40	2.80	0.51	0.00	0.00	1.60
1906 ...	0.00	0.00	0.00	0.00	0.00	2.90	1.40	0.00	0.51	0.00	0.00	0.00
1907 ...	0.00	0.00	0.00	0.00	4.24	0.00	2.70	2.80	2.00	0.00	0.00	0.50
1908 ...	1.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.50	4.51	0.00	1.66
1909 ...	1.24	0.00	0.00	0.00	0.00	0.00	4.17	0.00	1.50	0.00	0.00	1.11
1910 ...	0.00	1.53	0.00	0.00	4.22	0.00	2.78	0.00	0.50	0.00	0.00	1.66
1911 ...	0.00	3.66	0.00	0.00	2.36	0.00	3.10	0.00	1.08	0.00	0.00	1.87
1912 ...	0.00	0.00	13.16	0.00	0.00	0.00	0.00	2.65	1.61	0.00	6.21	0.62
Average from 1905-1912	0.46	0.84	1.64	0.00	1.43	0.36	1.94	1.03	1.28	0.56	0.78	1.13
1913 ...	4.27	0.00	0.00	0.00	2.33	0.00	3.06	2.63	1.07	2.45	0.00	3.09

OULTON BROAD SUB-DISTRICT.

Parish Mortality Rate per 1000. From Cancer (Malignant Diseases).

Year	Blundeston	Corton	Flixton	Gunton	Oulton	Barnby	Carlton Colville	Gisleham	Kessingland	Nutford	Rushmere	Pakefield
1905 ..	0.00	0.00	0.00	0.00	2.20	0.00	2.70	0.00	1.57	4.50	0.00	2.77
1906 ...	0.00	4.59	0.00	0.00	2.20	2.90	1.40	0.00	0.00	0.00	0.00	0.00
1907 ...	0.00	1.50	0.00	0.00	0.00	0.00	4.10	2.80	2.50	0.00	0.00	0.50
1908 ...	1.24	1.53	0.00	0.00	0.00	0.00	0.00	0.00	1.00	4.50	0.00	0.00
1909 ...	0.00	0.00	0.00	0.00	0.00	0.00	1.39	2.80	0.50	0.00	0.00	0.00
1910 ...	4.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.25	0.00	0.00
1911 ...	4.44	0.00	0.00	0.00	2.36	0.00	0.00	0.00	1.08	0.00	0.00	0.60
1912 ...	0.00	3.64	0.00	0.00	4.69	0.00	0.00	0.00	1.08	0.00	0.00	2.48
Average from 1905-1912	1.32	1.41	0.00	0.00	1.43	0.36	1.20	0.70	0.97	1.41	0.00	0.79
1913 ...	1.42	0.00	12.99	0.00	0.00	0.00	1.53	0.00	2.14	0.00	0.00	1.85

INFANTILE MORTALITY.

28 children (14 males and 14 females) died under 1 year of age, 2 more than in 1912.

The Infantile Mortality Rate was 96·55 per 1000 *nett* births which is lower than last year as there were more births.

The rate for England and Wales for 1913, was 109 per 1000 births, which is 12·45 higher than your District.

Of those 28 deaths, 11 (6 males and 5 females) were in the Belton Sub-District and 17 (8 males and 9 females) in the Oulton Broad Sub-District.

I am not including the death of an illegitimate male child of a Lowestoft woman which occurred in the Workhouse in April from Inherited Syphilis.

BELTON SUB-DISTRICT.

Infantile Mortality Rate 110 per 1000 gross births, against 118·42 last year.

BELTON had 1 death a female aged 5 months from Convulsions.

BRADWELL had 2 deaths, a male aged 3 days from Premature Birth and a female aged 6 months Convulsions,

BURGH CASTLE had 2 deaths, a male and female both aged 5 minutes from Premature Birth.

FRITTON had 1 death, a male aged 3 days from Congenital Debility.

HOPTON had 2 deaths, both males 1 aged 1 minute from Inanition and 1 aged 4 months from Bronchitis.

LOUND had 2 deaths, a male aged 6 months from Broncho-pneumonia and 1 female aged 9 months from Convulsions.

SOMERLEYTON had 1 death, a female aged 3 months from Broncho pneumonia.

OULTON BROAD SUB-DISTRICT.

Infantile Mortality Rate 81·21 per 1000 gross births against 90·91 last year.

BLUNDESTON had 1 death, a male aged 2 months from Whooping Cough.

OULTON 1 death an illegitimate female aged 1 month from Premature Birth.

BARNBY. 1 death, a male aged 16 days from Gastritis.

CARLTON COLVILLE. 3 deaths all females, 2 aged 10 hours from Premature Birth and 1 aged 5 months from Abdominal Tuberculosis.

KESSINGLAND. 5 deaths (2 males and 3 females), 3 from Premature Birth aged 7 hours, 12 hours and 3 days, 1 aged 11 days from Inanition and 1 aged 2 months from want of Milk.

MUTFORD. 1 death. a female aged 2 months from Broncho pneumonia. This was the only uncertified death in the District.

PAKEFIELD. 5 deaths (4 males and 1 female), 3 from Premature Birth, 2 aged 2 days (1 illegitimate) and 1 aged 3 weeks, 1 aged 7 months from Inanition and 1 aged 8 months from Broncho pneumonia.

The following parishes did not contribute any Infantile Deaths—Ashby, Herringfleet, Corton, Flixton, Gunton, Gisleham and Rushmere.

There were no deaths from Diarrhœa or Enteritis or Measles, but 1 death from Whooping Cough ; last year there were 2 deaths from Measles.

Premature Birth caused 12 deaths against 5 last year, Atrophy, Debility and Marasmus caused 5 deaths against 10 last year.

Pneumonia caused 4 deaths the same as last year.

Bronchitis caused 1 death against 3 last year.

Convulsions caused 3 deaths against 1 last year.

TABLE OF INFANTILE MORTALITY RATES.

Whole District.

Year	Males	Females	Total	Rate per 1000 births	Rate for England & Wales
1905	—	—	29	92·00	128
1906	21	13	34	106·25	133
1907	16	8	24	83·62	118
1908	20	14	34	99·41	121
1909	27	12	39	123·41	109
1910	12	11	23	78·76	106
1911	12	13	25	83·33	130
1912	12	14	26	100·78*	95
1913	14	14	28	96·55*	109

* Calculated on Nett Births,

BELTON SUB-DISTRICT

Year	Males	Females	Total	Rate per 1,000 Births registered
1906	10	4	14	150·09
1907	3	1	4	53·30
1908	7	5	12	133·30
1909	4	3	7	76·92
1910	6	4	10	100·00
1911	3	4	7	83·33
1912	6	3	9	118·42
1913	6	5	11	110

OULTON BROAD SUB-DISTRICT.

Year	Males	Females	Total	Rate per 1000 Births registered
1906	11	9	20	80·20
1907	13	7	20	94·33
1908	13	9	22	87·30
1909	23	9	32	141·77
1910	6	7	13	67·70
1911	9	9	18	83·33
1912	6	11	17	90·91
1913	8	9	17	81·21

The Average Yearly Infantile Mortality Rate for England and Wales for the nine years 1905—1913 was 116·55 ; for your District it was 96·01 or 20·54 lower.

Means for preventing Mortality in Childbirth and in Infancy.

The powers under the Midwives Act 1902, are exercised by the County Council and the midwives are supervised by their Inspector.

The Notification of Births Act is not in force in the District.

THE WORKHOUSE.

8 births (3 males and 5 females) were reported as having taken place in the Institution. Of those 8, 2 males and 1 female were legitimate, 1 male and 4 females being illegitimate. The legitimate Birth Rate was 10·79 per 1000, in 1912 it was 3·61 per 1000. The illegitimate Birth Rate was 17·98 against 14·44 in 1912.

The percentage of illegitimate births was 62·5; in 1912 it was 80.

There were 49 deaths (29 males and 20 females) registered, against 47 in 1912 and 39 in 1911.

There were no uncertified deaths.

One inquest was held.

One infant died under 1 year of age.

TABLE SHOWING MORTALITY
From all causes at different periods of life.

			<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Under 1 year of age	...	...	1	0	1
1 year and under 2 years	...	...	0	0	0
2 years	5	...	0	0	0
5 "	15	...	0	0	0
15 "	25	...	1	1	2
25 "	45	...	1	1	2
45 "	65	...	8	2	10
65 "	and upwards	...	18	16	34
Totals	...	...	29	20	49

Under the Infectious Diseases (Notification) Act 1889, 6 notifications were received, all Erysipelas cases. 5 males and 1 female, the female was aged 82, the males aged 55, 58, 65, 66 and 76. This is an increase on last year when only 2 cases of Erysipelas were notified.

Under the Tuberculosis Regulations 1912, 20 notifications were received ; of those 1 was a secondary notification and 11 were transferred. Of the 8 left, 2 on Form A, 2 on Form C. and 4 on Form D, concerned 5 persons, 3 of whom had addresses in the Rural District and are dealt with elsewhere.

The 2 cases on Form A, were a male aged 61 and a female aged 20, the latter went home and died and the house was disinfected.

Transferred Cases. 9 to Lowestoft (1 A, 4 C, 4D.)

1 on Form A, to Enfield.

1 on Form D, to Norwich.

Re-notified Cases. 1 on Form A, 2 on Form C, and 2 on Form D.

There were no non-pulmonary cases notified.

The male under 1 year died from Congenital Syphilis aged 2 months. A male aged 22 and a female aged 23 died from Phthisis. Between the ages 25 and 45, a male aged 40 died of Phthisis and a female aged 44 died of Syphilis.

Of the 10 between 45 and 65, 3 males aged 51, 55 and 59 died from Heart Disease, a male aged 56 from Bronchitis, a male aged 56 from Nephritis, 1 aged 59 from Aneurism, 1 aged 52 from Phthisis and 1 aged 61 from Pernicious Anæmia. 2 females, 1 aged 62 from Senile Decay and 1 aged 63 from Cerebral Hæmorrhage.

34 (18 males and 16 females), 69·4 of the total deaths were in persons aged 65 years and upwards.

At ages of 65 and under 70, 7 (4 males and 3 females) died from Cerebral Hæmorrhage, 1 from Cancer, 1 from Diabetes and 1 from Senile Dementia.

At ages of 70 and under 80, 16 died (12 males and 4 females), 6 from Senile Decay, 3 from Cerebral Hæmorrhage, 1 from Senile Gangrene, 1 from Heart Disease, 1 from Bronchitis, 1 from Broncho-pneumonia, 1 from Diabetes, 1 from Cystitis and one from Cancer.

At ages of 80 and under 90, 10 died (2 males and 8 females), 8 from Senile Decay, 1 from Rodent Ulcer and one from Wasting owing to a Fractured Leg. On this last case an inquest was held.

1 female aged 96 died from Senile Decay.

11 (7 males and 4 females) of those deaths including the 1 aged 96 were in persons from your District.

MORTALITY RATE per 1000.

Year.	Residents.	Non-Residents.	Residents and Non-Residents.
1905	44·60	85·50	130·10
1906	36·76	132·35	169·11
1907	29·09	98·18	127·27
1908	32·72	127·27	160·00
1909	50·90	130·90	181·81
1910	33·21	84·87	118·08
1911	47·27	94·54	141·81
1912	54·15	115·52	169·67
1913	39·57	136·69	176·26

INFECTIOUS DISEASES (NOTIFICATION) ACT, 1889.

116 notifications were received under this Act. They were as follows :—

Scarlet Fever	57
Diphtheria	38
Enteric Fever	4
Erysipelas	12
Puerperal Fever	1

This is the highest number recorded since 1907, when there were 150 cases notified.

Of those 112 cases, 22 (9 Scarlet Fever, 7 Diphtheria, 2 Enteric Fever and 4 Erysipelas) were received from the Belton Registration Sub-District ; 84 (48 Scarlet Fever, 31 Diphtheria, 2 Enteric Fever, 2 Erysipelas, and 1 Puerperal Fever) from the Oulton Broad Registration Sub-District.

6 Erysipelas cases were notified from the Workhouse.

WHOLE DISTRICT.

Table of Number of Notifications and Diseases recorded.

Year.	Enteric Fever.	Scarlet Fever.	Diphtheria.	Erysipelas.	Puerperal Fever,	Total.
1905	3	6	39	6	1	55
1906	5	19	20	4	0	48
1907	3	135	10	2	0	150
1908	2	35	7	7	2	53
1909	2	22	20	2	0	46
1910	1	13	7	3	1	25
1911	2	16	10	6	0	34
1912	1	11	18	8	0	38
1913	4	57	38	12	1	116
Average 1905-12	2.37	32.12	16.37	4.75	0.5	56.12

This Table shows that there has been a considerable increase in the number of notified cases, especially in Scarlet Fever and Diphtheria. 20 of the Scarlet Fever cases were notified from Pakefield and 19 Diphtheria cases were notified from Gisleham. This latter outbreak was the chief reason for my special report at the end of the year, no particular source could be traced as a common origin. In one case it was imported from another District and in several cases contact either in school or at play excited suspicion, but reviewing all the cases I am of the opinion that the Disease kept breaking out by the presence of mild unnotified cases acting as "carriers."

Chart showing number of Diseases notified each month.
WHOLE DISTRICT, 1913.

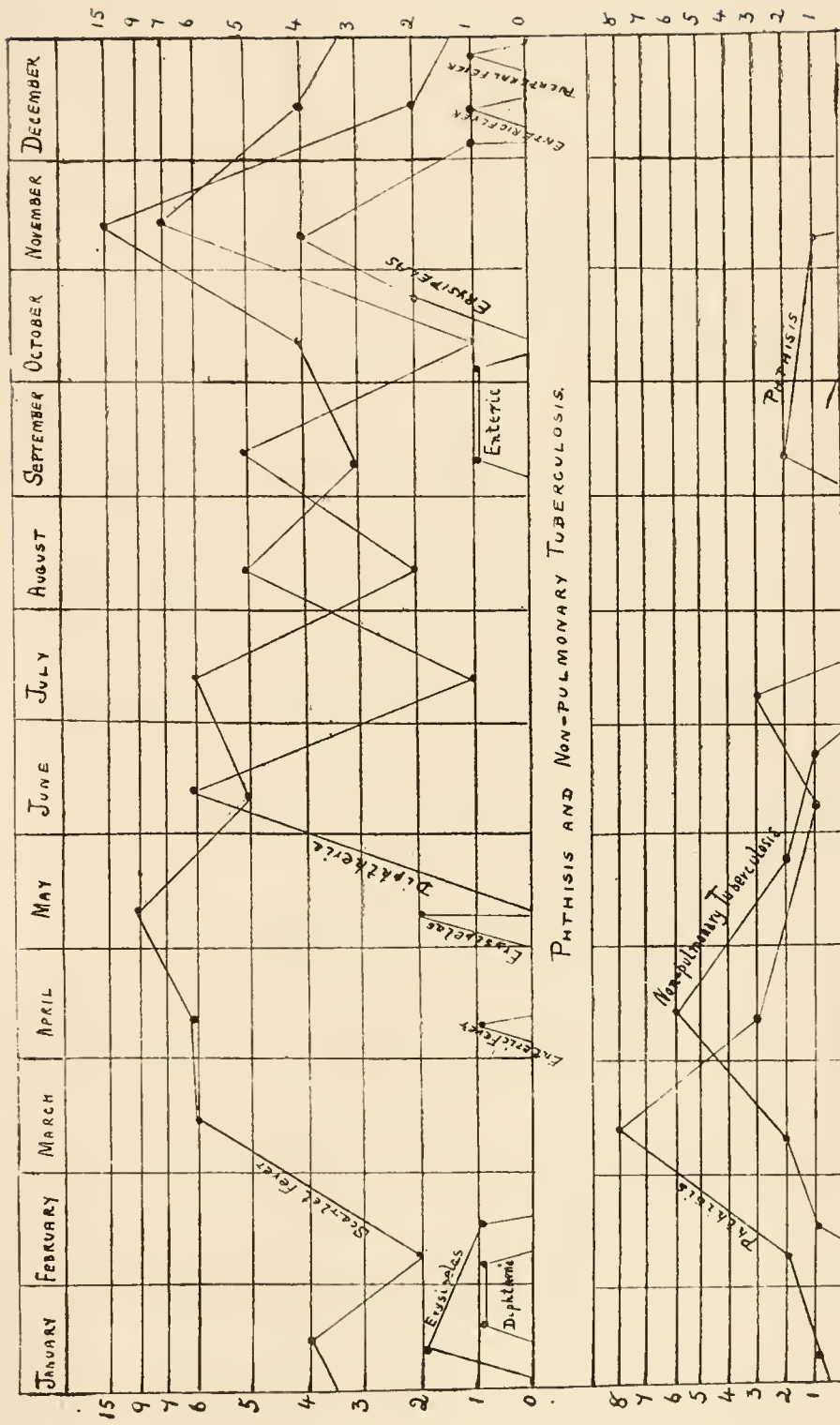
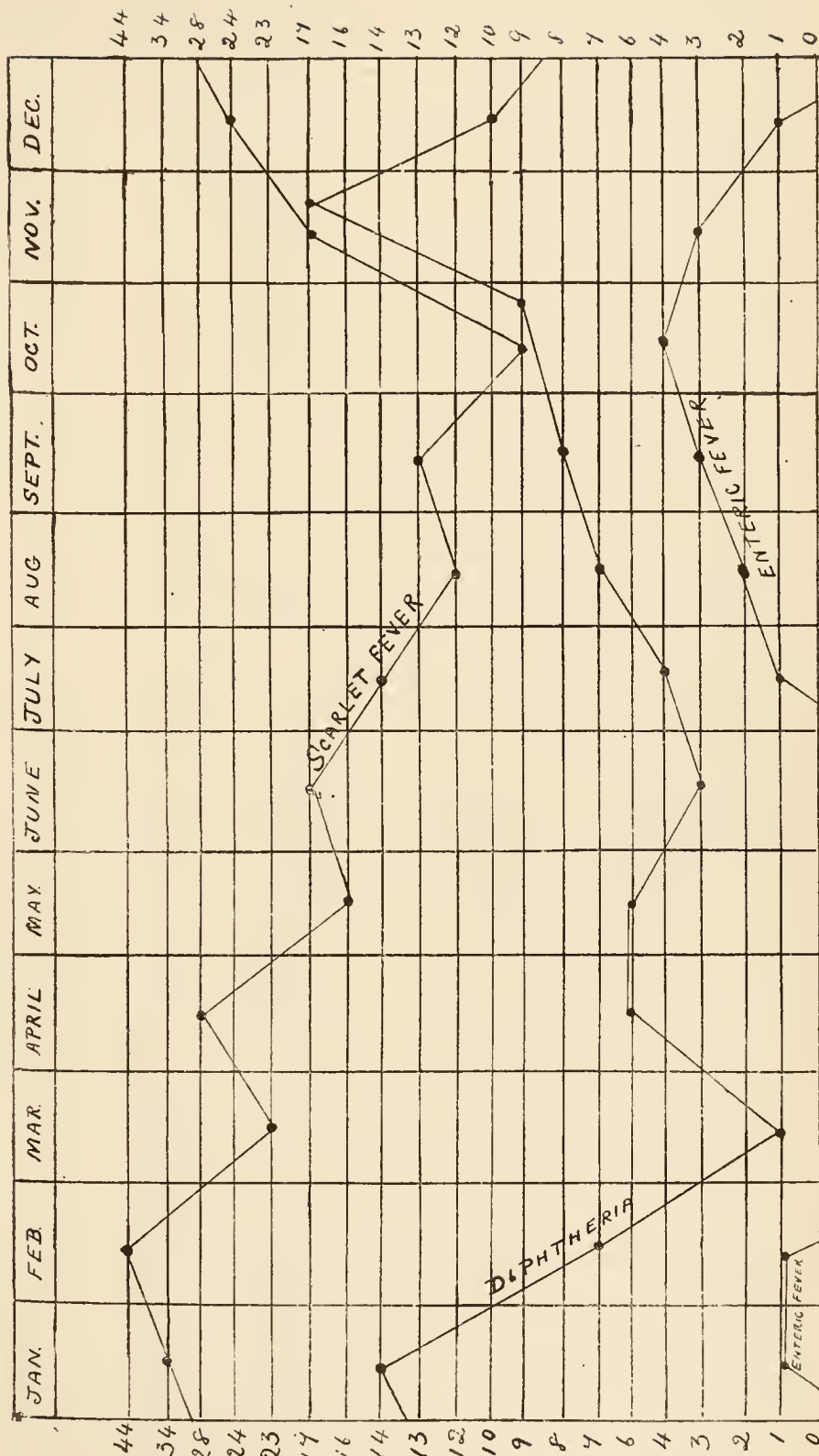


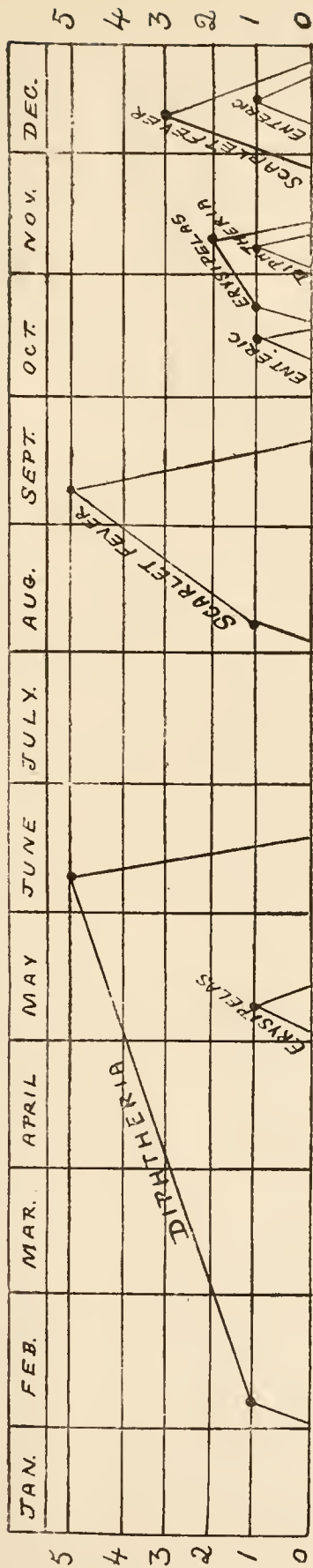
CHART FOR THE WHOLE DISTRICT.

Showing the total number of Diseases notified during the period 1906-1912 and the months of the year when those diseases prevailed.



BELTON SUB-DISTRICT.

Chart showing Diseases notified each month during 1913.



PHTHISIS AND NON PULMONARY TUBERCULOSIS.

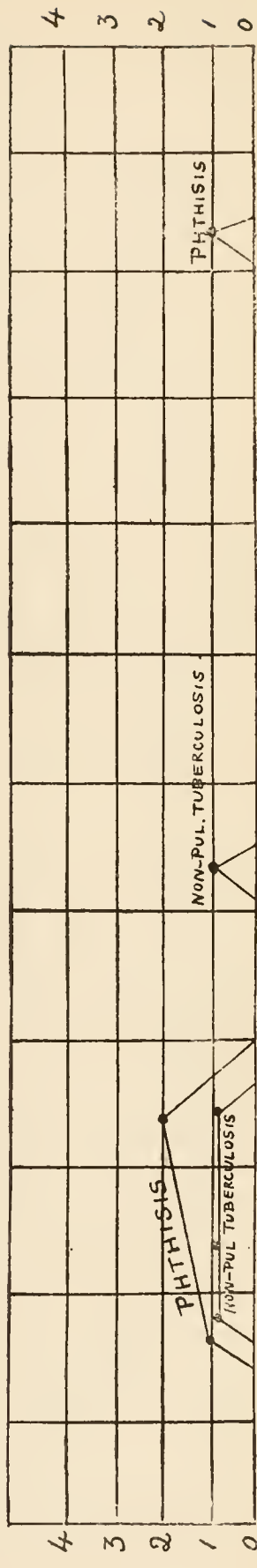
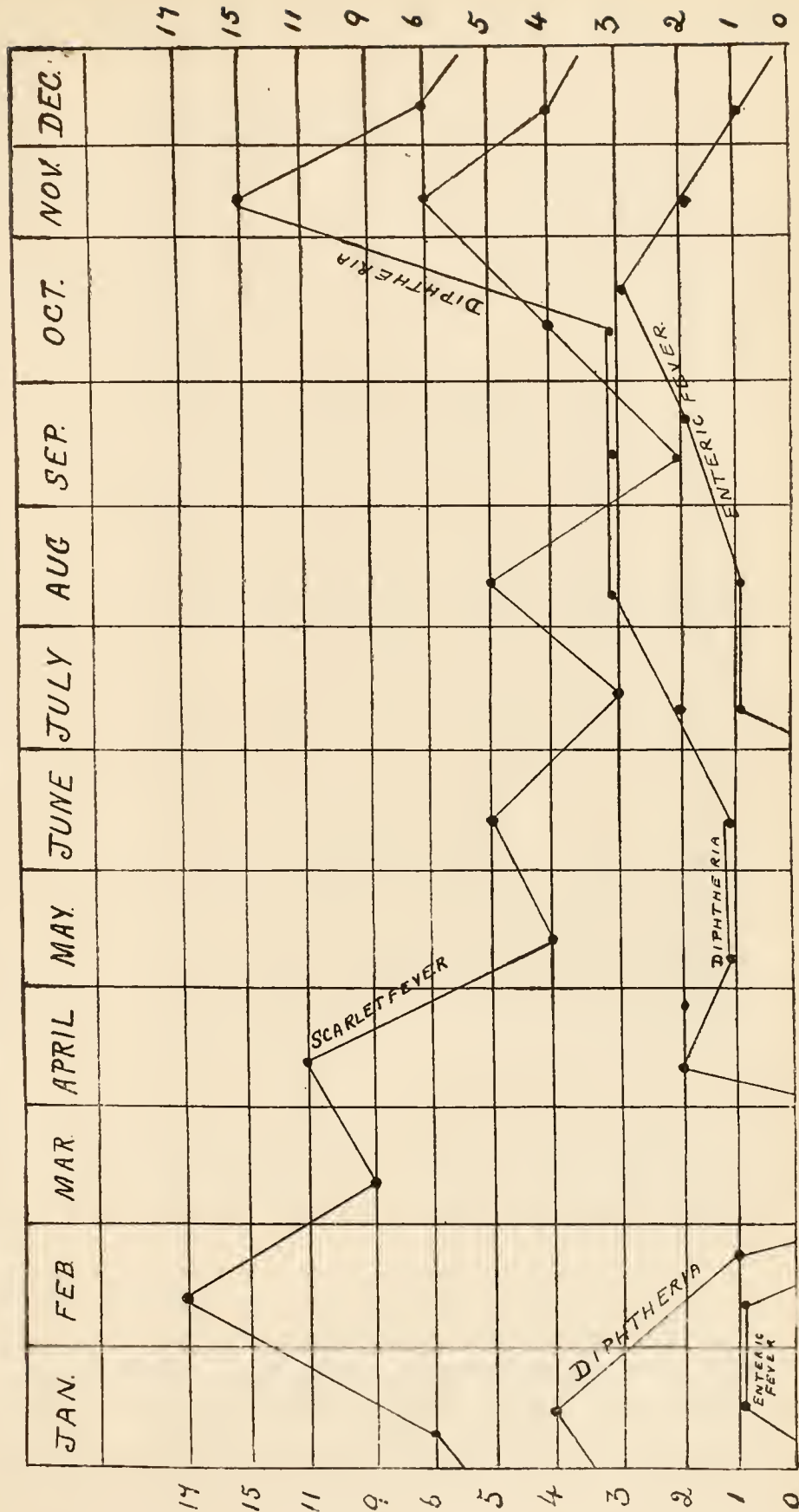


CHART FOR BELTON SUB-DISTRICT.

Showing the total number of certain Diseases notified during the period 1906-1912 and the months of the year when these diseases prevailed.



BELTON SUB-DISTRICT.

22 Notifications were received from this District against 17 in 1912.

They were as follows : 9 Scarlet Fever, 7 Diphtheria, 2 Enteric Fever and 4 Erysipelas.

ASHBY. Scarlet Fever 1.

This case a boy aged 3 was notified on 20th December.

There was no history of contact with any suspicious case and there had been no other cases recently in the neighbourhood.

BELTON. Scarlet Fever 2, Erysipelas 1.

The Scarlet Fever cases were 2 sisters aged 5 and 11 and notified on 3rd and 4th December and isolated at home. No suspicious history could be got, but 2 privies belonging to the house were converted to pail closets.

The case of Erysipelas notified on 14th November, a man aged 43, was said to be due to cold.

BRADWELL. Scarlet Fever 1, Diphtheria 2.

The Diphtheria cases were notified on 29th and 30th June, 2 brothers aged 5 and 7, and removed to Hospital. A privy at the house was converted into a pail closet. Both those children had been eating a considerable number of strawberries and it is just possible that they may have been picked or handled by infected persons or dust carrying bacilli may have settled on them when exposed for sale.

The case of Scarlet Fever, a boy aged 11 was notified on August 15th and removed to Hospital. 2 cases of sore throat were suspected of being mild cases but on investigation proved to be nothing more.

FRITTON. Diphtheria 2.

The first case was notified on February 17th, a boy aged $2\frac{1}{2}$, he was probably infected by his brother who was discovered to be a "carrier," when all the children attending Fritton School were swabbed on January 6th on account of the outbreak last year.

The second case on November 8th, a boy aged $5\frac{1}{2}$ had to be isolated at home. I suspect he was infected from a neighbouring District.

HERRINGFLEET. Scarlet Fever 1, Erysipelas 1.

The case of Scarlet Fever was notified on September 3rd and isolated at home. There was no history of origin unless he had contracted the disease when at a Sunday School Treat 6 days before.

The case of Erysipelas was notified on May 6th, a man aged 40 was said to be due to exposure to cold and wet.

HOPTON. Diphtheria 3, Typhoid 1, Erysipelas 1.

The first case of Diphtheria, was notified on 5th June, a boy aged 17 and removed to Hospital, 5 days later his brother was notified. The house was in rather a dilapidated state and was closed by the owners on being asked to repair it.

The third case a boy aged 7 was notified on June 12th, no contact with the previous cases could be traced ; as he had attended school, it was closed for a week for disinfection and no further cases occurred.

The Typhoid case was notified on 11th December, a man aged 60. He gave a history of having eaten a few oysters from a stall when attending a Cattle Show at Norwich about 19 days before.

The Erysipelas case a man aged 38 was notified on 30th October.

LOUND. Scarlet Fever 4, Typhoid Fever 1.

The 4 cases of Scarlet Fever were notified on 13th September, all in the same family which was found to be overcrowded and rather dirty.

The Typhoid Fever case, a woman aged 50 was notified on 31st October, no suspicious history could be traced.

SOMERLEYTON. Erysipelas 1,

This case was notified on 29th November, a woman aged 50.

BURGH CASTLE was the only Parish that had no Notifications during the year under the Act.

BELTON REGISTRATION SUB-DISTRICT.

Table showing the total number of Notifications received and the diseases notified from each parish for the eight years 1905-1912.

PARISH.	Enteric Fever.	Scarlet Fever.	Diphth- eria.	Erysip- elas.	Puerperal Fever.	Total.
ASHBY	0	0	0	0	0	0
BELTON	2	21	5	0	0	28
BRADWELL ...	1	24	7	0	1	33
BURGH CASTLE	2	5	4	1	1	13
FRITTON	1	2	6	0	0	9
HERRINGFLEET	1	2	6	2	0	11
HOPTON	5	9	4	1	0	19
LOUND	1	6	1	2	0	10
SOMERLEYTON	0	8	8	3	1	20
1913.						
ASHBY	0	1	0	0	0	1
BELTON	0	2	0	1	0	3
BRADWELL ...	0	1	2	0	0	3
BURGH CASTLE	0	0	0	0	0	0
FRITTON	0	0	2	0	0	2
HERRINGFLEET	0	1	0	1	0	2
HOPTON	1	0	3	1	0	5
LOUND	1	4	0	0	0	5
SOMERLEYTON	0	0	0	1	0	1
	2	9	7	4	0	22

OULTON BROAD SUB-DISTRICT.

Ninety cases were notified during the year from this District including the Workhouse.

48 Scarlet Fever, 31 Diphtheria, 2 Enteric Fever, 8 Erysipelas and 1 Puerperal Fever.

This total is a considerable increase on last year. Scarlet Fever was more prevalent during the first half of the year and only 2 parishes were unaffected: 2 parishes Carlton Colville (8 cases) and Pakefield (20 cases) had more than half the cases.

Diphtheria on the other hand was chiefly in evidence in the last 5 months of the year and only affected 3 parishes, Carlton Colville (6), Gisleham (19) and Pakefield (6), 4 other cases were notified but not confirmed by Bacteriological evidence, (one developed into Scarlet Fever). Notification of those cases was used as a prophylactic measure as the cases could be then removed from a house with several other children and isolated till the danger was passed.

On the other hand 3 cases with throats that looked normal, on bacteriological examination were proved to harbour bacillus and I am of the opinion that those and other undetected "carriers" were responsible for the disease recurring.

I do not believe that prophylactic doses of Antitoxin unless given in a wholesale fashion would have diminished the outbreak, as the 3 "carriers" discovered had an average of 32 days from the time of discovery till the time they were considered safe to be discharged from Hospital (i.e. they gave 3 consecutive negative swabs).

If they had received a prophylactic dose which would be less than the curative dose they got, it is not unreasonable to assume that they would for about 20 days be going about in an infectious condition.

Another contributory cause to the continuance of the disease is, that the average working man cannot afford to call in a doctor for what he calls a trifling "cold or sore throat."

The result of the prevalence of Diphtheria was that I made a special report at the end of the year which I have included at the end of this Report.

BLUNDESTON. 4 cases Scarlet Fever.

The 1st case was on 20th April, a platelayer on the railway who had been last working out of the District.

The next 3 cases were all in the same family, 2 notified on 12th May, one was said to be playing about 2 days before he died and the notification was not received till later, no doubt he infected the others

CORTON. 4 cases Scarlet Fever.

The 1st case was notified on 13th June and the next on 11th July; the brother of the latter was found to be in the peeling stage and 4 days later his sister was notified, as a result of those three cases their house was connected to the sewer.

Chart showing Diseases notified each month during 1913.

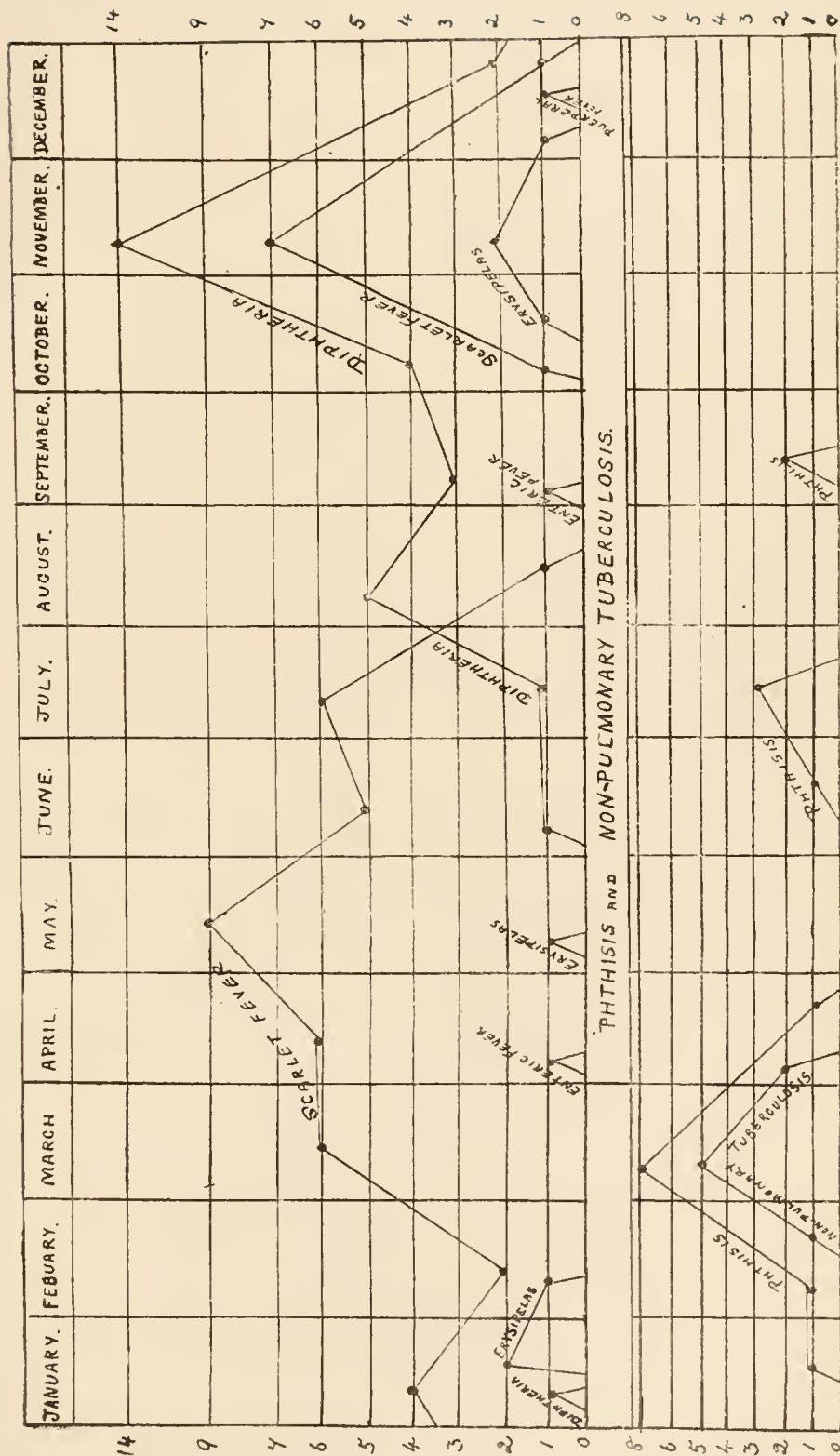
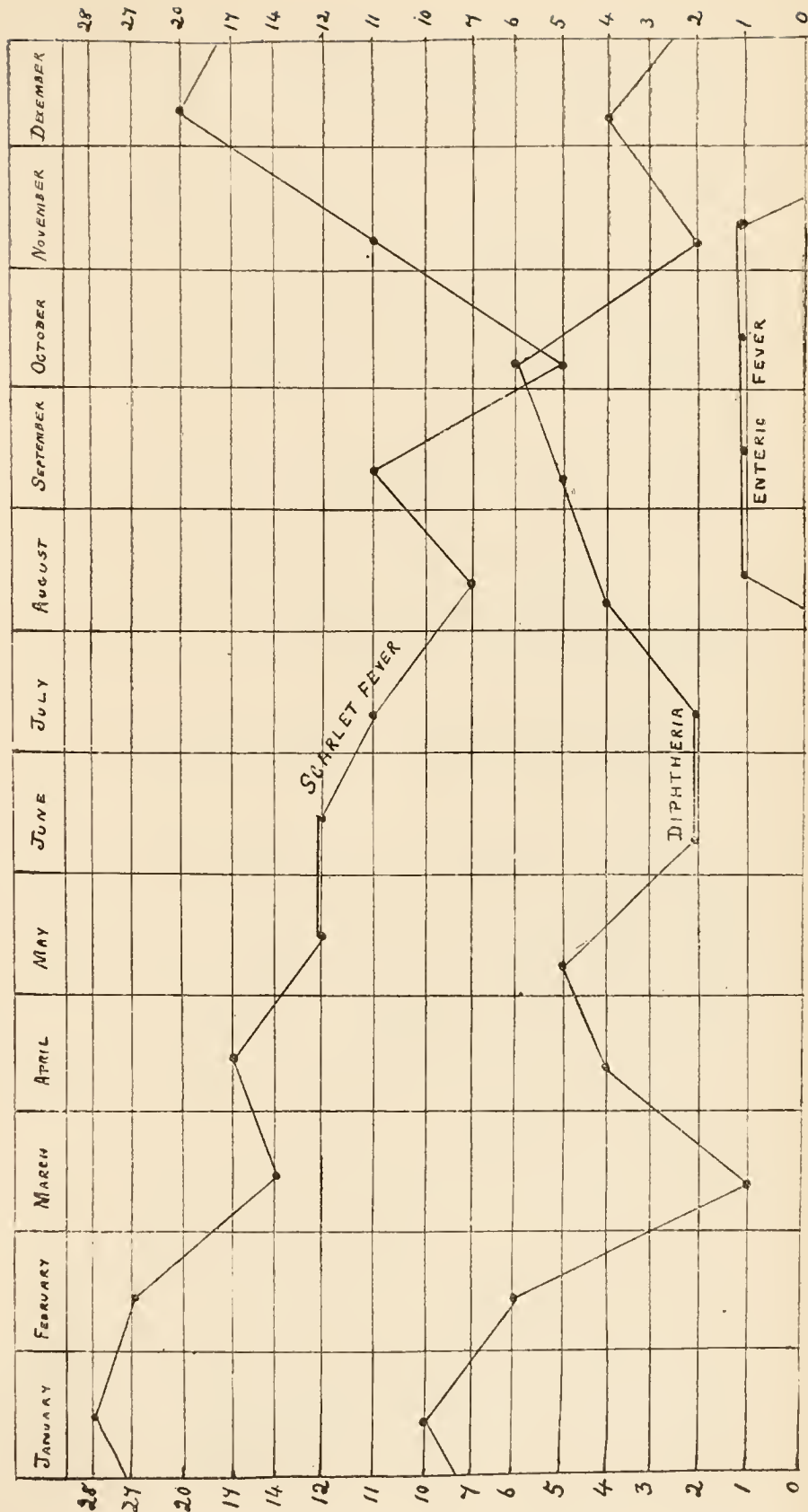


CHART FOR OULTON BROAD SUB-DISTRICT.

Showing the total number of certain Diseases notified during the period 1906-12
and the months of the year when those diseases prevailed.



FLIXTON. 1 Scarlet Fever, this case was notified on 2nd Nov., he had been at a picture palace a week before and probably was infected there.

BARNBY. 2 Scarlet Fever.

Those two cases were notified on 8th and 11th January, the first was peeling when discovered.

CARLTON COLVILLE. 8 Scarlet Fever, 6 Diphtheria

The 1st case was on 10th January and had no history of exposure to infection. The next five on 16th May were all in the same family, probably one infected the others. The next two were mother and son notified on 15th Nov., the mother had Diphtheria as well.

GISLEHAM. 19 Diphtheria, 3 Scarlet Fever.

The Scarlet Fever cases occurred on 10th May, 12th July and 18th Nov., the last two were in the same boy.

The Diphtheria cases are dealt with in the special report.

KESSINGLAND. 1 Scarlet Fever and 1 Enteric Fever.

The case of Scarlet Fever was notified on 13th Nov., the history was that she had been home in a neighbouring district about 10 days before and had been in contact with her brother who had a sore throat.

The case of Enteric Fever was also imported and notified on 25th Sept., she had come from another District for a holiday only two days before she felt ill.

PAKEFIELD. 20 Scarlet Fever, 6 Diphtheria, 1 Puerperal Fever, 1 Enteric Fever and 1 Erysipelas.

Scarlet Fever, the twenty cases were scattered over the whole year, no notifications being received in July, September and October. 6 notifications were received in March and 4 in April. In two families there were three cases in each and in 4 families two in each, the rest were isolated cases and I have no doubt mild cases were overlooked and went about spreading the disease.

The Diphtheria cases are referred to in the special Report.

The Puerperal Fever case was not attended by a certified midwife.

The Enteric Fever case was notified on 17th April and the drains being unsatisfactory were remedied.

WORKHOUSE. 6 cases of Erysipelas.

Gunton and Rushmere were the only parishes which did not have any notifications.

BACTERIOLOGICAL WORK. This is carried out in the County Laboratory at Ipswich, and during the year I sent up 274 swabs of throats (87 from schoolcases, 26 from other cases in the District and 161 from cases in Hospital).

OULTON BROAD REGISTRATION SUB-DISTRICT.
 Table showing total number of notifications received and the
 diseases notified from each parish for the period 1905-1912.

PARISH,	Enteric Fever.	Scarlet Fever.	Diph- theria.	Erysip- elas.	Puerperal Fever.	Total.
BLUNDESTON	1	15	3	2	0	21
CORTON	2	11	5	1	0	19
FLIXTON	0	3	0	1	0	4
GUNTON	0	0	1	0	0	1
OULTON	1	9	4	5	0	19
BARNBY	0	19	5	0	0	24
CARLTON COLVILLE	0	9	26	2	0	37
GISLEHAM	0	28	2	2	0	32
KESSINGLAND	0	55	22	6	1	84
MUTFORD	0	5	0	2	0	7
RUSHMERE	0	5	0	0	0	5
PAKEFIELD	2	20	22	1	0	45
WORKHOUSE	0	1	0	7	0	8
1913.						
BLUNDESTON ... ..	...	4	...	...	...	4
CORTON ... ..	...	4	...	...	...	4
FLIXTON ... ..	...	1	...	...	...	1
GUNTON ... ..	...	...	...	...	...	0
OULTON ... ..	...	4	...	1	...	5
BARNBY ... ..	...	2	...	...	...	2
CARLTON COLVILLE ... ..	...	8	6	...	...	14
GISLEHAM ... ..	...	3	19	...	...	22
KESSINGLAND	1	1	...	...	...	2
MUTFORD ... ..	...	1	...	...	...	1
RUSHMERE ... ..	...	...	...	...	...	...
PAKEFIELD	1	20	6	1	1	29
WORKHOUSE ... ..	...	...	...	6	...	6
	2 "	48	31	8	1	90

TUBERCULOSIS REGULATIONS, 1912.

Those Regulations came into force on the first of February and consolidated the previous Regulations of 1908 and 1911 under which Phthisis was notifiable before; they also made tuberculosis in other forms than Phthisis notifiable.

The result was a total of 61 notifications received, 48 of those concerned Phthisis cases and 13 cases non-pulmonary tuberculosis.

Of the 48 cases of Phthisis there were 28 on Form A, 1 on Form B, 8 on Form C. and 11 on Form D. Out of those, 13 were transferred to other Districts, 3 on Form A, 5 on Form C. and 5 on Form D.

Of the remainder 14 had been notified before, 4 on Form A, 1 on Form B, 3 on Form C. and 6 on Form D.

This leaves the *nett* number of notifications as 21 all on Form A, 7 of those were notified from Hospitals.

Of the 13 cases of non-pulmonary tuberculosis, 11 were on Form A. and 2 on Form B, one notified on Form B had been notified before so the *nett* number of notifications is 12. 6 of those were notified from Hospitals.

AGE AND SEX OF CASES NOTIFIED.

Age.	Phthisis.		Non-Pulmonary Tuberculosis.	
	Males,	Females.	Males	Females,
0—1 year ... ..	...	...	...	1
1— 5 years ... ..	...	...	2	...
5—15 „	2	5	5	1
15—25 „ ... ..	...	2	...	1
25—35 „ ... ..	...	2	...	2
35—45 „	1	1	...	...
45—55 „	1	3	...	...
55—65 „	2	1	...	...
65 and upwards ...	1	...	...	...
<hr/>				
	7	14	7	5

In all those cases the houses were visited and inspected for defects which would be liable to be injurious to health, and the Phthisis cases were supplied with disinfectants and sputum flasks and circulars containing advice as to infection, fresh air, etc.

8 of the cases notified have died and the houses were disinfected with Formalin spray and gas and the bedding removed for steam disinfection.

The only accommodation at present in the District is a ward at the Workhouse containing 8 beds.

ANTITOXIN ORDER, 1910.

The supply of Antitoxin stored in every parish has been replaced when it has been used, which happened during the year in Carlton Colville, Gisleham, Kessingland and Pakefield. In those parishes the supply of Antitoxin was used in 4 cases as a prophylactic measure and in 11 cases as a curative measure.

In other parishes the supply has been renewed when the time that the makers guarantee it for, has expired.

WATER SUPPLY.

The majority of the houses in the District get their water supply from shallow wells of various depths and judging from the samples analysed during the year, this source, as might be expected is not very satisfactory.

Fourteen houses have been connected to the Lowestoft Water Company's supply during the year, which brings the total number up to 537.

This Company gets its supply from a chain of lakes fed by springs at Lound, the water is filtered before delivery and gives a good result on analysis. The supply is constant and sufficient.

During the year I analysed twenty-four samples of water, and five certificates were issued for new houses under Sec. 6 of the Public Health (Water) Act 1878. Two were issued to houses at Belton, both had tube wells 30 and 36 feet deep. It is gratifying to find that good water can be got at this depth in this parish, as last year 2 shallow wells were found unsatisfactory.

One was issued for 2 cottages at Somerleyton which had the Company's water laid on.

Two were issued for new houses using old wells, one at Kessingland and one at Hopton.

Two old wells at Bradwell and Blundeston were found satisfactory on analysis.

Of the remainder 8 new wells, 6 at Kessingland, 1 at Carlton Colville and 1 at Blundeston were unfit.

Of the old wells, 1 at Gisleham and 1 at Bradwell were suspicious, and 2 at Kessingland, 2 at Belton, 1 at Carlton Colville, 1 at Rushmere, 1 at Oulton and and at Mutford were unsatisfactory and the tenants were advised to boil the water.

In no case was the water suspected of causing infectious disease, but in one case it was said to be causing sores on a family, and there has not been time yet to show whether the new supply will cure this.

Only in one well did the analysis suggest sewage pollution and in that case a new well was sunk.

RIVERS AND STREAMS.

There are no rivers in the District apart from the Waveney which is the northern boundary of the district and no complaints of its pollution have been made.

The Fritton marshes which received considerable attention last year on account of the prevalence of Diphtheria in that parish, still remain in a waterlogged condition, the only variation being that they get worse in winter and better in summer.

A new sluice has been put in for the outlet of the mill dyke, but the sill was built for a waterwheel and is too high to get enough water away to drain the land properly.

DRAINAGE AND SEWERAGE.

KESSINGLAND has a drainage system of its own by which the sewage is collected in tanks and then pumped on to contact beds whence it goes to filter beds and perlocates through to a small stream which runs across the marshes to the sea. The effluent is clear and has no smell.

During the year the whole of the filtering media of one of the second contact beds has been washed, screened, replaced and made up to the proper level with $\frac{1}{2}$ in. to $\frac{3}{8}$ in. beach gravel with satisfactory results and a good effluent.

The dyke adjoining has been cleaned out with the result that the drainage of the irrigation area has improved.

The underdrains of the storm water beds have been relaid and the filtering media made up.

In addition to those houses connected to the sewers there are 400 privies and pail closets, 380 dustbins, 26 Cesspools and 4 Ash-pits which are emptied by a scavenging contractor.

PAKEFIELD has a Septic tank system, giving a satisfactory effluent which discharges into Kirkley Run and through Lowestoft Harbour to the sea.

The sewer has been extended 230 yards in London Road for the purpose of draining the new school.

During the year one of the Septic tanks has been cleaned out and part of the irrigation area dug. Kirkley Run dyke adjoining the disposal works and for some distance below has been cleaned out.

Besides the houses connected to the sewers there are 380 privies and pail-closets, 380 dustbins, 10 cesspools and 4 ashpits. Those are emptied by a scavenging contractor.

No complaints have been received about the 3 private sewage disposal works in the District.

Offensive Trades, Cellar Dwellings and Common Lodging Houses do not exist in the District.

SCHOOLS.

During the year I was appointed Assistant School Medical Officer to inspect the schools in my District.

The usual water supply is from a well except in those places where there is a branch from the Lowestoft Water Company's pipes. I have had no complaints about the quality of the water, and it was not found necessary to analyse any samples.

Owing to Infectious Diseases the following schools were closed :—

Barnby	from	15 January	to	3 February	for	Scarlet Fever.
Lound	„	22 „	„	10 „	„	Whooping Cough.
Gisleham	„	5 March	till	after Easter	for	Mumps.
Pakefield	„	11 „	„	„	„	„
Barnby	„	1 April	till	14 April.	„	„
Hopton	„	16 June	„	23 June	„	Diphtheria.
Corton	„	14 July	„	4 August	„	Scarlet Fever.
Gisleham	„	21 July	„	4 August	„	„
„	„	29 Sept.	„	6 October	„	Diphtheria.
„	„	10 Nov.	„	24 November	„	„

Owing to Diphtheria at Fritton School in the beginning of the year the whole school had their throats swabbed when they met after Christmas and 1 "carrier" was discovered and excluded with the result that there were no further cases.

The same proceeding was taking at Gisleham in November and 2 "carriers" discovered, but it failed to stop the outbreak.

From those schools and others intimation was received if infectious disease was the cause of children being absent. This is the only information obtained at present of the non-notifiable infectious diseases.

At Bradwell school it was found necessary to reconstruct the drainage arrangements. the pail closet which was about 6 feet from a class room window, was moved further away, and the drainage which previously was led by an open pipe to a small piece of garden adjoining the playground, is now taken by a proper drain to a cesspool.

At Gisleham school a disused pond on the premises was emptied and filled with sand.

DAIRIES, COWSHEDS & MILKSHOPS ORDERS.

There are 90 Cowsheds and Dairies on the Register, 3 more than in 1912. and 28 visits and inspections were made during the year.

3 applications were made to register.

2 notices were served during the year both of which were complied with.

The state of the cowsheds in the District is fairly satisfactory but the yards outside are anything but clean in some cases.

It has not been found necessary to stop the sale of milk from any dairy on account of infectious diseases and no complaints have been received about its quality.

The taking of samples for analysis is done under the administration of the County Council, and so also are samples taken under the Sale of Food and Drugs Acts. In neither case have I heard of any complaints.

Fewer inspections have been made than in previous years owing to the large number of notifications of infectious diseases taking up more of the Inspector's time than usual.

3 cows have been slaughtered under the Tuberculosis (Cattle) Order which came into force in May 1913.

SLAUGHTER HOUSES.

The three in the District were inspected and found satisfactory and no diseased meat was seized.

BAKEHOUSES.

The four in the District were inspected and found satisfactory.

No action was taken under the Sale of Food and Drugs Act and no proceedings taken under Sec. 117 of the Public Health Act 1875.

HOUSING AND TOWN PLANNING ACT, 1909.

Considerable progress has been made during the year under the Housing (Inspection of Districts) Regulations 1910. The present arrangement is that the Sanitary Inspector inspects the houses in the South part of the District and the Surveyor inspects those in the North part. 387 houses have been inspected 272 records of inspection have been examined by the Sanitary Committee, most of those were brought up at a Special Meeting in November. Where a house was reported as defective in the first case a letter was written to the owner pointing out the defects. In this way about 150 letters were written but as this left only a month of the year there was little time for the owners to remedy defects and for re-inspections, besides the owners explained that the winter was not the proper time to do outside work.

Although the re-inspections are few it is very satisfactory to find that in 92 per cent. of houses repairs had been carried out.

7 notices were issued under Sec. 15, Sub-sec. 3, requiring the landlord to carry out repairs and they were complied with.

3 Closing Orders were issued under Sec. 17, one on a house reported last year as defective where nothing had been done and two on two old wooden houses which were unfit for habitation; when the Closing Order became operative the tenants were served with notices under Sec. 17 (sub-sec. 4) and moved, one of the houses is now used as a cobbler's workshop.

Table according to Act V. Housing (Inspection of District) Regulations.

I	The number of dwelling-houses inspected under and for the purposes of Section 17 of the Act of 1909	381
II	The number of dwelling houses which on inspection were considered to be in a state, so dangerous or injurious to health as to be unfit for human habitation ...	5*
III	The number of representations made to the local authorities with a view to the making of closing orders	3
IV	Number of closing orders made	3
V	Number of dwelling-houses the defects in which were remedied without the making of closing orders	37
VI	The number of dwelling houses which after the making of closing orders were put into a fit state for human habitation ...	0
VII	The general character of the defects found to exist.	<i>see table.</i>
* Owner of two houses informed if necessary repairs are not carried out a closing order would be issued with the result that the work was done.		

SUMMARY OF DEFECTS FOUND.

Parish.	Houses Inspected	Water Supply.	Closet Accommodation.	Drainage.	Lighting.	Ventilation.	Dampness.	Cleanliness.	Refuse Dispos.l.	Paving & Drainage of Yards.
BRADWELL	18	2	5	2	2	6	7	2	...	3
HOPTON	9	...	1	1	2	6	7	4	...	1
LOUND	6	...	...	...	2	5	6	1	...	2
SOMERLEYTON	2	...	...	1	...	1	1	...	...	...
BLUNDESTON	3	...	...	...	...	3	3	...	...	...
CORTON	4	...	1	...	...	...	3	1	...	...
GUNTON	13	...	3	2	...	6	5	1	1	...
OULTON	84	7	39	6	5	45	59	3	...	11
BARNBY	65	5	9	1	3	23	24	1	1	4
CARLTON COLVILLE	154	3	48	1	8	22	70	...	7	24
KESSINGLAND	2	...	2	...	2	2	2	...	2	2
PAKEFIELD	21	...	18	...	2	8	15	2	10	11
	381	17	126	14	26	127	202	15	21	58

TABLE SHOWING PROGRESS OF INSPECTION DURING 1913.

PARISH.	Number Inspected.	Number reported to the Council.	Number not yet Reported.	Number found satisfactory.	Number re-inspected.	Number repaired.	Number not re-inspected.	Number closed.
BRADWELL	18	3	15	8	...	...	10	...
HOPTON	9	5	4	2	...	...	7	3
LOUND	6	5	1	...	...	...	6	...
SOMERLEYTON	2	2	...	1	...	...	1	...
BLUNDESTON	3	...	3	...	...	...	3	...
CORTON	4	4	...	...	4	4	...	1*
GUNTON	13	13	...	2	4	4	7	...
OULTON	84	...	84	8	8	8	68	...
BARNBY	65	65	...	23	6	6	36	...
CARLTON COLV'LE	154	154	...	60	6	6	88	...
KESSINGLAND	2	2	...	...	...	...	...	2
PAKEFIELD	21	21	...	1	12	9	8	...
	381	274	107	105	40	37	234	9

* INSPECTED LAST YEAR.

In three cases the owners closed houses rather than do the necessary repairs.

26 Statutory Notices were served during the year.

12 under the Housing Act as referred to above.

And 14 under the Public Health Act 1875,

1 to provide a pail closet.

2 to convert privies to pail closets,

5 to ventilate drains,

1 to convert a pail closet into a water closet.

2 to provide proper drains.

1 to provide a proper cesspool.

2 to abate overcrowding.

Five cases of overcrowding were dealt with, two at Barnby, one family left the District and in the other case it was arranged that two of the boys slept downstairs. One at Kessingland was abated by the family moving into a new house.

One at Oulton by one of the family sleeping in another house and one at Lound by the family going to another parish where they live in a railway carriage and by utilising all the compartments they get the minimum air space of 300 cubic feet.

28 new houses have been erected during the year and certified fit for occupation and I consider more could be built without much chance of standing empty. A man at Fritton has been trying all the year to get an empty house in the parish but without success ; as he has a family of six he requires a larger house than usual and it is a matter for regret that in this case a family is a handicap.

During the year the various parishes were asked whether they needed more houses and at the end of the year all had not replied, but roughly one-third of the parishes wanted more but this I think under-estimates the needs of the district as it is the exception to see an empty cottage in any parish.

One builder is reported to have said it was impossible to build houses under the existing byelaws as they were too strict, but I consider any relaxation of the byelaws would be a retrograde step and would tend to make more defective houses than there are at present.

CANAL BOAT ACTS.

Seventeen Canal Boats (Wherries) were inspected and the condition of the boats and their occupants were satisfactory.

They are inspected while they lie at the landing stages or are boarded from the banks of the waterways.

No cases of Infectious disease were notified or discovered upon them and it was not found necessary to detain any for cleansing or disinfection.

No legal proceedings were necessary as there was no case of infringement of the Acts or Regulations.

The number of boats inspected is the same as last year, both being fewer than usual, last year it was owing to the floods and this year there appear to be fewer boats in commission.

FACTORIES AND WORKSHOPS ACT 1901.

At the end of the year there were 4 Factories and 45 Workshops on the Register which is a decrease of 1 from last year. None were added to the Register and 1 engineering (factory) shop was closed.

There are no steam Laundries or underground Bakehouses coming under the Act and there are no lists of Homeworkers either received from or sent to another Authority.

In one case a written notice was served on a cobbler on account of want of cleanliness and it was complied with.

Fewer inspections than usual have been carried out owing to the heavy demands made on the Inspector's time by infectious diseases which were roughly three times as many as last year. By perusing his report it is easily seen that his appointment is no sinecure.

JOINT SMALLPOX HOSPITAL, CARLTON COLVILLE.

No case from the District was admitted during the year.

OULTON JOINT ISOLATION HOSPITAL.

On January 1st there were 7 cases in Hospital from 1912, 5 (2 males and 3 females) cases of Scarlet Fever belonged to the Urban District and 2 cases (both females), one Scarlet Fever and 1 Diphtheria, belonged to the Rural District.

During the year 1913, 85 cases were admitted (44 males and 41 females) so that the actual number treated was 92 (46 males and 46 females). The total number discharged was 79 (41 males and 38 females). Two died (1 male and 1 female), and at the end of the Year 11 (4 males and 7 females) remained in Hospital.

Of the 85 cases admitted, 66 (37 males and 29 females) were from the Rural District, and 19 (7 males and 12 females) from the Urban District.

The 66 cases admitted from the Rural District were made up as follows :—

Scarlet Fever	34	(18 males and 16 females).
Diphtheria	-	28 (17 males and 11 females).
Enteric Fever	-	4 (2 males and 2 females).

The 19 cases admitted from the Urban District were made up as follows :—

Scarlet Fever	-	18 (7 males and 11 females).
Diphtheria	-	1 (1 female).
Enteric Fever	-	0

Two deaths took place in the Institution during the Year, both from the Rural District, 1 male from Enteric Fever and 1 female from Scarlet Fever.

Percentage Mortality of cases *Treated* in Hospital.

	1912.			1913.		
	Number of Cases.	Number of Deaths.	Percentage of Deaths.	Number of Cases.	Number of Deaths.	Percentage of Deaths.
Scarlet Fever ...	22	0	0	58	1	1.7
Enteric Fever ...	1	0	0	4	1	25.0
Diphtheria ...	11	1	9.1	30	0	.0
Totals ...	34	1	2.9	92	2	2.2

Table showing age incidence of Cases *admitted* during 1913.

	0-1.	1-5.	5-15.	15-25	25-45	45-65	65 and Upw'ds.	Total
Scarlet Fever	1	16	25	7	3	-	-	52
Enteric Fever	-	-	-	-	2	2	-	4
Diphtheria	-	4	21	3	1	-	-	29
Total ...	1	20	46	10	6	2	0	85

MAINTENANCE.

The Scarlet Fever cases had 2722 days' maintenance, those from the Rural District 1580 days, and those from the Urban District 1142 days.

The Diphtheria cases had 922 days' maintenance, those from the Rural District 875 days, and those from the Urban District 47 days.

The Enteric Fever patients, all from the Rural District, had 92 days' maintenance.

The total number of days' maintenance of patients was 3736, of which those from the Rural District had 2547 days, and those from the Urban District had 1189 days.

The average number of patients was 10.22; from the Rural District 6.957; from the Urban District 4.192.

This number of patients is the highest since the Hospital was built in 1900, and the accommodation even when taxed to the utmost, with due regard for cross infection, failed on two occasions.

(1) From May 8th to May 20th, I was unable to admit Scarlet Fever cases as there were 14 in Hospital as well as 1 Enteric Fever.

(2) From November 4th to 15th, I was unable to admit Diphtheria cases as there were 8 in already, as well as 7 Scarlet Fever and 1 Enteric Fever.

This may not occur again for many years, but on the other hand it may and I consider an extra block of 2 wards of 4 beds each could be erected of wood and iron, without undue expense. It would not only act as a convalescent ward and so relieve the other wards, but could also be used as an observation ward for doubtful cases or as an isolation ward for a Diphtheria case complicated with Scarlet Fever or *vicê versâ*; at present those cases have to be put in a ward by themselves and take up valuable ward space which could otherwise be well employed. This suggestion is at present being considered by the Committee.

During the year the administration of the Hospital was re-arranged, the Caretakers, a married couple, being replaced by a Matron, which I am sure will make for increased efficiency and smoother working.

The water supply, which is pumped by a wind-mill from a 45ft. well, caused considerable inconvenience on several occasions by shortage of water, due to lack of wind, once due to a burst pipe, which was not discovered till, as a last resource, the underground pipe was laid bare after the pump and mill had been overhauled.

As water is such an important factor in a Hospital, the Committee are now considering the question of having the Water Company's supply laid on, or a petrol or petrol electric driven pump.

IMPROVEMENTS.

The underground electric light wires from the administrative block to the wards and outbuildings have been replaced by overhead wires, as there was considerable leakage from the old system and occasional short circuiting.

A telephone installation between the wards and the administrative block was put in.

The steam disinfector was overhauled.

Canvas bags were provided for removal of infected bedding.

A set of milk cans with padlocks and duplicate keys was provided in order that the milk in transit might not be exposed to dust or pollution.

A candle lamp has replaced the paraffin lamp for internal lighting of the ambulance.

The space between the wards and kitchen was tarred, which makes it cleaner and drier in wet weather and diminishes the dust which is blown into the wards in dry weather.

Three fire extinguishers were provided for use in the house and wards.

The kitchen, scullery and 2 rooms were distempered and the out-houses lime-washed.

Number of Cases Treated.

From the MUTFORD AND LOTHINGLAND RURAL DISTRICT.

	1905.	1906.	1907.	1908.	1909.	1910.	1911.	1912.	1913.
Diphtheria.	22	10	1	3	16	7*	5	11	29
Scarlet Fever.	5	12	69*	19	9	17*	12	11	35
Enteric Fever	3	5	1	1	1	0	1	1	4
	—	—	—	—	—	—	—	—	—
Totals.	30	27	71	23	26	24	18	23	68
	—	—	—	—	—	—	—	—	—

From the OULTON BROAD URBAN DISTRICT.

	1905.	1906.	1907.	1908.	1909.	1910.	1911.	1912.	1913.
Diphtheria.	3	6	2	0	0	1	1	0	1
Scarlet Fever.	1	2	1	8	4	2	12	11	23
Enteric Fever.	0	0	1	3	0	1	4	0	0
	—	—	—	—	—	—	—	—	—
Totals.	4	8	4	11	4	4	17	11	24
	—	—	—	—	—	—	—	—	—
From both Districts.	34	35	75	34	30	28	35	34	92
	—	—	—	—	—	—	—	—	—

* Two cases of Scarlet Fever and one of Diphtheria were in members of the Staff.

I have to thank the Council for the allowance of £15 per annum granted at the beginning of the year for travelling expenses.

As my travelling is done by motor-cycle it covers a considerable part of the upkeep and running costs of the machine.

I have to thank all the Officials with whom I have come in contact, for the kindness and courtesy they have shown in assisting me.

I am,

Your obedient Servant,

CARLTON COTTAGE,

LAURENCE GIBSON,

OULTON BROAD,

Medical Officer of Health.

SUFFOLK.



TABLE I.

*Name of District—MUTFORD & LOTHINGLAND RURAL.***Vital Statistics of Whole District during 1913 and previous Years.**

Year	Population estimated to Middle of each Year	BIRTHS			TOTAL DEATHS Registered in the District		TRANSFERRABLE DEATHS†		NETT DEATHS BELONGING TO THE DISTRICT		
		Un-corrected Number	NETT		Number *	Rate	of Non-residents registered in the District †	of Residents not registered in the District †	Under 1 Year of Age		At all ages
			Number †	Rate					Number *	Rate per 1,000 Nett Births	
1	2	3	4	5	6	7	8	9	10	11	12 13
1908	12372	342	...	...	168	13.57	36	7	34	...	139 11.23
1909	12372	316	...	...	166	13.40	38	5	39	...	133 10.75
1910	12372	292	...	...	148	11.96	25	4	23	...	127 10.26
1911	11184	300	289	25.84	161	14.39	30	9	25	86.5	140 12.51
1912	11267	263	258	22.90	149	13.22	32	14	26	100.78	131 9.80*
1913	11339	297	290	25.57	175	15.43	38	16	28	96.55	153 11.37*

* Corrected Death Rate.

TABLE II.

Cases of Infectious Diseases notified during the Year 1913.*

Name of District—MUTFORD & LOTHINGLAND RURAL. (See Notes on Page 61)

Name of Disease.	NUMBER OF CASES NOTIFIED.							TOTAL CASES NOTIFIED IN EACH LOCALITY (e.g. Parish or Wsrd of the District)						TOTAL CASES REMOVED TO HOSPITAL		
	All Ages†— Years.							Belton Sub-District	Oulton Broad Sub-District	Workhouse						
	Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and upwards									
NOTIFIABLE DISEASE.	At all Ages															
Small-pox ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
†Cholera (C) Plague (P)	38	6	26	3	2	1	...	...	...	...	...	...	...	...	...	28
Diphtheria (including Membranous croup)	12	...	...	...	4	3	...	...	...	...	...	...	...	...	...	...
Erysipelas	57	15	34	5	3	...	...	...	...	...	...	...	...	...	...	35
Scarlet Fever ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Typhus Fever	4	...	...	...	2	2	...	...	...	...	...	...	...	...	...	4
Enteric Fever ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
†Relapsing Fever (R) Continued Fever (C)	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-spinal Meningitis ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Poliomyelitis ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pulmonary Tuberculosis	21	...	8	1	4	7	...	...	...	...	...	...	...	...	...	...
Other forms of Tuberculosis	12	2	6	1	2	...	...	...	...	...	...	...	...	...	...	...
Totals	145	1	23	74	10	18	13	6	30	108	7	...	...	...	...	67

TABLE III.

Causes of, and ages at, Death during the year 1913.*Name of District : MUTFORD & LOTHINGLAND RURAL.*

(See Notes on page 61).

CAUSES OF DEATH.	Net Deaths at the subjoined ages of "Residents," whether occurring within or without the District [a].									Total Deaths whether of "Residents" or "Non- Residents" in Institu- tions in the District [h]
	All Ages.	Under 1 year.	1 and under 2	2 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards.	
1	2	3	4	5	6	7	8	9	10	11
All causes	152	27	4	2	11	7	22	29	49	51
Certified (c)	1	1	...	...	...	...	...	...	...	...
Uncertified	...	...	...	...	...	...	...	...	...	...
Enteric Fever	2	...	...	...	...	...	1	1	...	1
Small-pox ... ..	...	...	...	...	...	...	...	...	...	...
Measles ... ..	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	3	...	...	...	2	1	...	...	...	1
Whooping Cough	2	1	...	1	...	...	...	...	...	...
Diphtheria and Croup	1	...	...	...	1	...	...	...	...	...
Influenza	3	...	...	...	...	...	...	2	1	...
Erysipelas	1	...	...	...	...	...	...	...	1	...
Phthisis (Pulmonary Tuberculosis)	17	...	...	...	...	4	7	4	2	4
Tuberculous Meningitis... ..	1	...	...	...	1	...	...	...	...	...
Other Tuberculous Diseases	1	1	...	...	...	...	...	...	...	...
Cancer, malignant diseases	14	...	1	...	...	...	3	5	5	3
Rheumatic Fever ... ..	...	...	...	...	...	...	...	...	...	...
Meningitis (See Note d)	1	...	...	...	1	...	...	...	...	...
Organic Heart Disease	12	...	...	...	...	...	...	5	7	4
Bronchitis	6	1	1	...	...	...	...	1	3	2
Pneumonia (all forms)	13	4	1	...	2	...	3	1	2	1
Other diseases of Respira- tory Organs ... ..	...	...	...	...	...	...	...	...	...	...
Diarrhœa and Enteritis (See Note e) ... ..	...	...	...	...	...	...	...	...	...	...
Appendicitis and Typhlitis	2	...	...	...	2	...	...	...	...	...
Cirrhosis of Liver ... ..	...	...	...	...	...	...	...	...	...	...
Alcoholism ... ..	...	...	...	...	...	...	...	...	...	...
Nephritis and Bright's Disease	6	...	...	...	1	...	...	4	1	1
Puerperal Fever	1	...	...	...	...	...	1	...	...	...
Other accidents and di- seases of Pregnancy and Parturition	1	...	...	...	...	...	1	...	...	...
Congenital Debility and Malformation, including Premature Birth	17	17	...	...	...	...	...	...	...	...
Violent Deaths, excluding Suicide (1 age unknown)	6	...	...	...	...	1	2	1	1	...
Suicide	2	...	...	...	...	...	1	1	...	...
Other Defined Diseases	41	4	1	1	1	1	3	4	26	34
Diseases ill-defined or unknown ... ..	...	...	...	...	...	...	...	...	...	...
Totals	153	28	4	2	11	7	22	29	49	51

TABLE IV.

MUTFORD & LOTHINGLAND RURAL DISTRICT.

Infant Mortality.

1913. Nett deaths from stated causes at various ages under 1 year of age.

(See Note (a) on page 61).

CAUSES OF DEATH.		Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 1 month.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total Deaths under 1 year.
All causes	Certified ...	13	1	1	1	16	1	5	4	1	27
	Uncertified	...	...	...	...	...	1	...	...	...	1
Small-pox	... ..	...	...	...	...	...	...	...	...	...	...
Chicken-pox	... ..	...	...	...	...	...	...	...	...	...	...
Measles	... ..	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	... ..	...	...	...	...	...	...	...	...	...	...
Whooping Cough	... ..	...	...	...	...	...	...	1	...	...	1
Diphtheria and Croup	... ..	...	...	...	...	...	...	...	...	...	...
Erysipelas	... ..	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	... ..	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis	... ..	...	...	...	...	...	...	...	...	...	...
(b) ... ..	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	... ..	...	...	...	...	...	...	1	...	...	1
Meningitis (not Tuberculous)	... ..	...	...	...	...	...	...	...	...	...	...
Convulsions	... ..	...	...	...	...	...	...	1	1	1	3
Laryngitis	... ..	...	...	...	...	...	...	...	...	...	...
Bronchitis	... ..	...	...	...	...	...	...	1	...	...	1
Pneumonia (all forms)	... ..	...	...	...	...	...	1	1	2	...	4
Diarrhoea	... ..	...	...	...	...	...	...	...	...	...	...
Enteritis	... ..	...	...	...	...	...	...	...	...	...	...
Gastritis	... ..	...	...	1	...	1	...	...	...	...	1
Syphilis	... ..	...	...	...	...	...	...	...	...	...	...
Rickets	... ..	...	...	...	...	...	...	...	...	...	...
Suffocation, overlying	... ..	...	...	...	...	...	...	...	...	...	...
Injury at birth	... ..	...	...	...	...	...	...	...	...	...	...
Atelectasis	... ..	...	...	...	...	...	...	...	...	...	...
Congenital Malformations	... ..	...	...	...	...	...	...	...	...	...	...
(c) ... ..	...	...	...	...	...	...	...	...	...	...	...
Premature birth	... ..	10	...	...	1	11	1	...	...	...	12
Atrophy, Debility, and Marasmus	... ..	3	1	...	...	4	...	...	1	...	5
Other causes	... ..	...	...	...	...	...	...	...	...	...	...
Totals	... ..	13	1	1	1	16	2	5	4	1	28

Nett Births in the year { legitimate 285
illegitimate 5

Nett Deaths in the year of { legitimate infants 26
illegitimate infants 2

NOTES TO TABLE I.

This Table is arranged to show the gross births and deaths in the district, and the births and deaths properly belonging to it with the corresponding rates. For years before 1911 some of the corrected rates probably will not be available. The rates should be calculated per 1000 of the estimated gross population. In a district in which large Public Institutions for the sick or infirm seriously affect the statistics, the rates in Columns 5 and 13 may be calculated on a nett population obtained by deducting from the estimated gross population the average number of inmates not belonging to the district in such institutions.

*In Column 6 are to be included the whole of the deaths registered during the year as having actually occurred within the district.

In Column 12 is to be entered the number in Column 6, corrected by subtraction of the number in Column 8 and by addition of the number in Column 9. Deaths in Column 10 are to be similarly corrected by subtraction of the deaths under 1, included in the number given in Column 8, and by addition of the deaths under 1 included in the number given in Column 9.

†The Medical Officer of Health will be able from the returns made to him by the local Register of Deaths, as well as from the quarterly lists furnished by the Registrar-General, to fill in Column 8 in accordance with the rule in the next paragraph below. The Registrar-General, either directly or through the County Medical Officer of Health, will supply the Medical Officer of Health with the particulars of deaths to be entered in Column 9; and all such deaths must be included in this Column, unless an error is detected, and its correction has been accepted by the Registrar-General. For Column 4 the Registrar-General will furnish to the Medical Officer of Health a Statement of the number of births needing to be added to or subtracted from the total supplied by the local Registrar.

‡“Transferable Deaths” are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they resided. The deaths of persons without fixed or usual residence, *e.g.*, casuals, must not be included in Columns 8 or 9, except in certain instances under 3 (*b*) below. The Medical Officer of Health will state in Column 8 the number of transferable deaths of “non-residents” which are to be deducted, and will state in Column 9 the number of deaths of “residents” registered outside the district which are to be added in calculating the nett death-rate of his district.

The following special cases arise as to Transferable Deaths:—

(1) Persons dying in Institutions for the sick or infirm, such as hospitals, lunatic asylums, workhouses, and nursing homes (but not almshouses) must be regarded as residents of the district in which they had a fixed or usual residence at the time of admission. If the person dying in an Institution had no fixed residence at the time of admission, the death is not transferable. If the patient has been directly transferred from one such Institution to another, the death is transferable to the district of residence at the time of admission to the first Institution.

(2) The deaths of infants born and dying within a year of birth in an Institution to which the mother was admitted for her confinement should be referred to the district of fixed or usual residence of the parent.

(3) Deaths from Violence are to be referred (*a*) to the district of residence, under the general rule; (*b*) if this district is unknown, or the deceased had no fixed abode, to the district where the accident occurred, if known; (*c*) failing this, to the district where death occurred, if known; and (*d*) failing this, to the district where the body was found.

Area of District in acres (land and inland water), 29,603.

Number of inhabited houses, 2,579.

Total population at all ages, 11,184.

Average number of persons per house, 4.3.

} At Census, 1911 (cf. Census,
Vol. V.)

NOTES TO TABLE II.

State in space below the name and position within or without the district of the isolation hospital or hospitals, sanatoria or other institutions to which the residents in the district, suffering from infectious disease, have usually been sent, and the name of the authority by whom the hospital is provided.

§ This space may be used for record of other diseases the notification (compulsory or voluntary) of which is in force in the district.

† These age columns for notifications should be filled up in all cases where the Medical Officer of Health, by inquiry or otherwise, has obtained the necessary information.

‡ Specify the disease by initial against the figure.

* The figures should take account of any corrections made as a result of error in notification or revision of diagnosis as a result of the further course of the disease (*cf.* para (3) on p. 3 of the Weekly Summary of Cases of Infectious Diseases).

Isolation Hospitals, or Hospitals, Sanatoria, etc.—Joint Isolation Hospital (within the District) the property of the Mutford and Lothingland Rural and Oulton Broad Urban District Councils: Joint Smallpox Hospital at Carlton Colville, the property of Lowestoft Corporation, Mutford and Lothingland Rural and Oulton Broad Urban District Councils.

NOTES TO TABLE III.

The classification and numbering of Causes of Death are those of the "Short List" on page XXV. of the Manual of the International List of Causes of Death, which should be consulted and followed in all cases of doubt.

Copies of this Manual were distributed to Medical Officers of Health in 1912 by the Registrar-General, and may be purchased either directly or through any bookseller from Wyman & Sons, Fetter Lane, E.C., price 1s.

(a) All "Transferable Deaths" of residents, *i.e.*, of persons resident in the District who have died outside it, are to be *included* with the other deaths in columns 2-10. Transferable deaths of non-residents, *i.e.*, of persons resident elsewhere in England and Wales who have died in the District, are in like manner to be *excluded* from these columns. For the precise meaning of the term "transferable deaths" *see* footnote to Table I.

The total deaths in column 2 of Table III. should equal the figures for the year in column 12 of Table I.

(b) All deaths occurring in institutions for the sick and infirm situated within the district, whether of residents or of non-residents, are to be entered in the last column of Table III.

(c) All deaths certified by registered Medical Practitioners and all Inquest cases to be classed as "Certified"; all other deaths are to be regarded as "Uncertified."

(d) Exclusive of "Tuberculous Meningitis" (10), but inclusive of Cerebro-spinal Meningitis.

(e) Title 19 should be used for deaths from Diarrhoea and Enteritis at all ages. (In the "Short List" deaths from Diarrhoea and Enteritis under 2 years are included under Title 19; those at 2 years and over being placed under Title 28.)

NOTES TO TABLE IV.

(a) The total in the last column of Table IV. should equal the total in column 10 of Table I., and in column 3 of Table III.

(b) Under Abdominal Tuberculosis are to be included deaths from Tuberculous Peritonitis and Enteritis and from Tabes Mesenterica,

(c) The total deaths from Congenital Malformations, Premature Birth, Atrophy, Debility and Marasmus, should equal the total in Table III. under the heading Congenital Debility, and Malformation including Premature Birth. Want of Breast Milk should be included under Atrophy and Debility.

(d) For references to the meaning of any other headings, *see* notes attached to Table III.

In recording the facts under the various headings of Tables I., II., III. and IV., attention has been given to the notes on the Tables.

LAURENCE GIBSON,

February 24th, 1914.

Medical Officer of Health.

Factories, Workshops, Workplaces and Homework.

1.—Inspection.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Particulars,	Number of		
	Inspections.	Written Notices.	Prosecutions,
Factories (including Factory Laundries) ...	3	0	0
Workshops (including Workshop Laundries)	22	1	0
Workplaces (other than Outworkers' premises included in Part 3 of this Report) ...	0	0	0
Total	25	1	0

2.—Defects Found.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts :—</i>				
Want of cleanliness	1	1	...	...
Want of ventilation
Overcrowding
Want of drainage of floors
Other nuisances
insufficient
Sanitary unsuitable or defective
accommodation not separate for sexes
<i>Offences under the Factory Workshop Acts :—</i>				
<i>Acts :—</i>				
Illegal occupation of underground bakehouse (s. 101)
Breach of special sanitary requirements for bakehouses (ss. 97 to 100)
Other offences
(Excluding offences relating to outwork which are included in Part 3 of this Report)
Total	1	1	...	...

* Including those specified in sections 2, 3, 7 and 8, of the Factory and Workshop Act as remediable under the Public Health Acts.

3.—HOMEWORK.

Nature of Work—*	Number,
Wearing Apparel (i., making, etc. ; ii., cleaning and washing)—Household linen—(Lace, lace curtains and nets—Curtains and furniture hangings—Furniture and upholstery—Electro-plate—File making—Brass and brass articles—Fur pulling—Cables and chains—Anchors and grapnels—Cart gear—Locks, latches and keys—Umbrellas, etc.—Artificial flowers—Nets, other than wire nets—Tents—Sacks—Racquet and tennis balls—Paper, etc., boxes, paper bags—Brush making—Pea picking—Feather sorting—Carding, etc., of buttons, etc.—Stuffed toys—Basket making—Chocolates and sweetmeats—Cosaques, Christmas crackers, Christmas stockings, etc.—Textile weaving	<i>Nil</i>
Total	

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year.

	Number.
Cobblers 4, Carpenters 6, Wheelwrights 3, Bakehouses 4	17
Paintshops 2, Smithies 14, Brickworks 3, Saddlers 2 ...	21
Plumbers 2, Cycle repairing 3, Twine spinners 1 ...	6
Dressmaking 2, Foundry 1, Netmaking 1, Tailor 1 ...	5
Total number of Workshops on Register	49

5.—OTHER MATTERS.

	Number.
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Acts (s. 133, 1901)	
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshops Acts (s. 5, 1901) ...	Notified by H.M. Inspector.
Other	Reports (of action taken) sent to H.M. Inspector
Underground Bakehouses (s. 101) :—	<i>Nil.</i>
Certificates granted during the year	
In use at the end of the year	

(Signature) LAURENCE GIBSON,

February 6th, 1914.

Medical Officer of Health.

MR. CHAIRMAN AND GENTLEMEN,

In presenting this, my 11th Annual Report, I have as in previous years enumerated under the various headings, inspections and other duties discharged.

Undoubtedly you will note that comparatively few inspections have been made under the Dairies, Cowsheds and Milkshops orders and under the Factory and Workshops Acts ; this is accounted for by extra duties under Housing and Town Planning Act and Tuberculosis (Notification) Acts. Duties appertaining to infectious diseases have been exceptionally heavy during the latter part of the year and have occupied too much of my time.

In reviewing the work of the past decade, I am pleased to note that the general sanitary progress of your district has been satisfactory, that the Council has at all times assisted the officers in the discharge of their multifarious duties, that the best feeling has (and does) exist between Council and Officers ; and as a natural consequence the work of the Sanitary Department has been progressive.

I have to thank each member of the Council and the Medical Officer of Health for the support they have at all times afforded me in the discharge of my duties ; and have pleasure in remembering that in no instance during my term of office, has there been friction or unpleasantness.

I am, Gentlemen,

Your obedient Servant.

THOMAS WOOD,

Sanitary Inspector.

Council Offices,
Oulton Broad,
13/1/14.

Summary of Sanitary Inspector's Report, 1913.

Factories, Workshops, Lavatories, Workplaces and Home-workers inspected.

Workshops (including Workshop Laundries)	...	...	49
Home workers	...	(There are none).	

Defects found.

Want of cleanliness	...	...	...	...	1
Want of drainage to floors	...	...	...	...	0
Sanitary accommodation unsuitable or defective	...	...	...	...	0
Failure to affix Abstract of Factory and Workshop Act	...	...	...	...	0

Workshops on Register at the end of 1913.

Cobblers	...	...	...	...	...	4
Carpenters	...	...	...	...	...	6
Wheelwrights	...	...	...	...	...	3
Bakehouses	...	...	...	...	...	4
Paintshops	...	...	...	...	...	2
Smithies	...	...	...	...	...	14
Tailors	...	...	...	...	...	1
Brickworks	...	...	...	...	...	3
Saddlers	...	...	...	...	...	2
Plumbers	...	...	...	...	...	2
Cycle Repairing	...	...	...	...	...	3
Twine Spinners	...	...	...	...	...	1
Dressmakers	...	...	...	...	...	2
Foundry	...	...	...	...	...	1
Netmakers	...	...	...	...	...	1

Rural District.

Houses and premises inspected under Public Health Acts	...	703
Houses inspected under Housing and Town Planning Act	...	242
Intimation notices served	...	17
Statutory notices served	...	14
Nuisances discovered	...	70
Complaints received	...	4
Summonses heard before Justices	...	0

Nuisances Dealt with.

Pail closets converted into water closets	...	...	7
Privies and Middens converted into Pail Closets	...	...	14
Insanitary Refuse Middens abolished	...	...	8
Galvanised Iron Refuse Bins provided	...	...	30
Bath, Sink and Waste pipes disconnected	...	...	6
Choked and defective drainage	...	...	28
From deposit of Fish Offal	...	...	3
Insanitary Closets under Public Health Acts	...	...	24
" " " Housing and Town Planning Act	...	...	50
" " demolished and rebuilt	...	...	4
From Overcrowding	...	...	5
From keeping of Swine	...	...	2
" " " Fowls	...	...	1
From defective paving, under Housing and Town Planning Act	...	...	27

Housing and Town Planning Act 1909.

Number of Inspections made	...	...	242
Houses (or offices) found in order	...	...	81
Houses (or offices) not found in order	...	...	161
Intimation Notices served	...	...	7
Statutory Notices served	...	...	12
Closing Orders issued	...	...	3
Re-inspections made	...	...	22
Notices complied with	...	...	21

Cowsheds, Dairies and Milkshops.

Number of Cow-keepers and Dairymen on Register	...	90
" " applications for registration as cow-keepers and purveyors of milk	...	3
" " visits made to cowsheds and dairies	...	28
" " notices issued under dairies, cowsheds and milkshops Orders	...	2

Tuberculosis Order 1913 (Animals).

Number of Inspections made	...	3
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Canal Boats Acts.

Number of Canal Boats visited and inspected	17
---	-----	-----	----

Water for Analysis.

Number of samples taken and delivered to Medical Officer of Health for analysis	23
---	-----	-----	----

Slaughter Houses.

Number visited and inspected	3
------------------------------	-----	-----	---

Factories and Workshops Acts.

Number of bakehouses inspected	...	...	3
„ „ blacksmiths shops inspected...	...	...	8
„ „ tailors' shops inspected	...	...	1
„ „ carpenters' and wheelwrights' workshops inspected			2
„ „ boot repairing workshops inspected	...	...	2
„ „ brickworks (Factories) inspected	...	...	2
„ „ paint shops inspected	...	...	1
„ „ saddlers' and cycle repairing workshops inspected			3
„ „ dressmakers' workshops inspected	...	...	1
„ „ twine spinners' workshops inspected	...	...	0
„ „ plumbers' workshops inspected	...	...	0
„ „ foundry (Factory) inspected	...	...	1
„ „ net makers' workshops inspected	...	...	1
„ „ workshops on register	...	...	49

Infectious Diseases and Disinfection.

Number of houses disinfected after infectious disease	...	...	95
„ „ visits made to infected houses	...	...	190
„ „ persons removed to Isolation Hospital	...	...	66
„ „ articles of clothing and bedding disinfected (in lots) by steam	...	...	83
„ „ persons suffering from Phthisis, supplied with disinfectants and literature	...	...	27
„ „ persons suffering from Erysipelas supplied with disinfectants and literature	...	...	5

(Signed) THOMAS WOOD, A.R.S.I., M.S.I.A.

Inspector of Nuisances.

13th January, 1914.

TO THE MUTFORD AND LOTHINGLAND
RURAL DISTRICT COUNCIL.

DIPHTHERIA.

LOWESTOFT,

23rd December, 1913.

MR. CHAIRMAN AND GENTLEMEN,

I now lay before you my report on the prevalence of Diphtheria in the Rural District of Mutford and Lothingland during the last 5 months, and the steps taken to prevent its spread.

The first case, M.C., was notified on 20th July from Gisleham, a girl aged 7. She was removed to the Isolation Hospital, her bedroom was disinfected with formalin gas and spray, and the bedding removed for steam disinfection, the house and its surroundings were examined for sanitary defects, and some small ones discovered and remedied.

The next four cases all belonged to the same family and lived in an adjoining parish, Carlton Colville, they were notified on 13th, August and isolated at home. The Medical practitioner in attendance took advantage of the free supply of antitoxin both for patients and contacts. One of those four children had had sores on his face and a nasal discharge for about a month previously, and had been taken to a chemist for treatment and doubtless infected his brothers and sister. Later on the original case was removed to hospital, as the others had recovered, in order that the house might be declared free from infection. I found the pail closet was adjacent to a pigstye, and arranged with the owner to build another pail closet in a more suitable site.

The next case, J.R., a boy aged 15 was notified on 24th August from Gisleham, and isolated at home. I visited the house but could get no history of infection, and I found the house satisfactory.

The next case, L.S., a boy aged 3 was notified on 18th Sept. from Pakefield, 2 miles from the other cases. The borough adjoining this parish reported 8 cases for that week and possibly the

infection was caught there. He was removed to Hospital and the pail closet belonging to the house was converted into a water closet.

The next case, A.C., a boy aged 5 was notified on 27th Sept., from Gisleham and removed to Hospital. He had been to school 2 days before and the school was closed for a week for disinfection. He belonged to the same family as the first case and on swabbing the whole family, M.C., was found to be positive and removed to Hospital.

The next case, F.C., a boy aged 5 was notified on 30th Sept. from Gisleham and removed to Hospital. He probably was infected at school from the previous case.

The next case O.H., a girl aged 10 was notified on 2nd October from Gisleham, and gave a history of having drunk out of the same cup as the previous case on 29th September.

Another case notified on 2nd October at Kessingland and removed to Hospital proved not to be Diphtheria. As there were 6 other children in the house and the case was suspicious, I thought it advisable to remove her to Hospital till the result of the swab was reported.

The next case at Gisleham, C.B., a boy aged 4 was notified on 5th October and I suspect he was infected by the 1st case, O.H. notified on 2nd October, he was removed to Hospital.

The next case was at Pakefield, S.C., aged 5 and removed to Hospital, the house was satisfactory but the sewer at the back of the house was not sufficiently ventilated and steps are being taken to have this remedied.

The next three cases at Gisleham were notified on 3rd Nov. all members of the same family, I suspect one may have had the disease some time and infected the others. They were all removed to Hospital, and a ditch beside the house which had been used as a refuse pit was cleaned out.

The next case at Gisleham was notified on 4th Nov., G.N., a boy aged 3. As his family used the same well as the family with the previous cases I suspect some contact with them.

The next case, A.A. was notified at Fritton on 8th November which is about 8 miles from Gisleham I suspect he was infected from a household in a neighbouring District, one member of whom attended Fritton School until the family was put in quarantine.

The next case at Gisleham, A.E., was notified on 8th November a boy aged 7. He was probably infected at School as he sat next one of the cases notified on 3rd November.

The next case, D.R. on 13th November from Kessingland was admitted to Hospital as Diphtheria but proved to have Scarlet Fever with severe throat symptoms and a throat swab being taken was reported as non diphtheritic. She had been home in a neighbouring district 10 days previously and been in contact with her brother who was reported to have a bad throat.

The next case, E.C., at Carton Colville notified on 15th Nov. could give no suspicious history and nothing unsatisfactory could be found about the house.

The next case at Pakefield on 17th Nov. was removed to Hospital and no suspicious history could be got.

The next case at Gisleham on 18th Nov., A.B. had gone to visit her daughter in neighbouring district on 9th Nov. and three days later the daughter was notified.

The next at Carlton Colville on 20th Nov. was the mother of the case E.C. notified on 15th Nov. Further observation did not confirm the diagnosis but by this time anything suspicious was being kept under close observation in order that no source of infection should be left alone.

The next case at Gisleham, M.C., a girl aged 8 lived next door A.B. and had been in contact with her previous to notification. Both those houses had privies which are to be converted to pail closets.

The next case on 21st Nov. at Gisleham, C.C. bore a close enough resemblance to Diphtheria, to be notified and kept isolated at home.

The last case on Nov. 23rd. L.C., at Gisleham, a girl aged 5 was probably infected by playing on the road with two other children who lived close by, and were found when the whole school was swabbed to be "carriers" one of them having had a sore throat 2 months ago.

STEPS TAKEN TO PREVENT FURTHER SPREAD.

On a notification being received the house was visited and enquiries were made as to possible origin and the house and surroundings were investigated for sanitary defects, such defects were reported and steps taken to abate the nuisance.

Antitoxin, a supply of which is stored in every parish, was at the disposal of the medical man in attendance, and in 13 cases it was made use of for the patient and in 3 cases it was used as a prophylactic measure.

In two cases the medical man supplied his own.

17 cases were removed to the Isolation Hospital and 11, who had not already received Antitoxin, got it. No case was discharged till 3 consecutive swabs were reported as non-diphtheritic, this in one case delayed discharge for 11 weeks.

4 other cases would have been removed if there had been accommodation. I reported this to your Council at their last meeting, who the matter was referred to the Joint Hospital Committee who postponed the subject for further consideration.

When a case was removed to Hospital the bedroom was sprayed with formalin spray and then all openings into the room were sealed and a lamp generating formalin gas left in for six hours at least. All the bedding from the room was removed to the Hospital for steam disinfection.

Those cases not removed to Hospital were provided with Jeyes' Fluid, and given instructions for its use for washing and soaking linen, and in some cases I arranged that the medical man or I should take a swab and prove that the case was non-infectious before declaring it free from infection, and then the bedroom and bedding were disinfected as above.

On no occasion after a case was notified was I able to prove it as the source of infection in subsequent cases.

SCHOOLS.

Five schools were involved: Gisleham, 13 cases; Carlton Colville, 4 cases; Pakefield, 2 cases; Kessingland, 1 case; Fritton, 1 case; and 7 were not of school age. When a case was notified all children from the infected house were excluded from school for a fortnight if the case was removed to Hospital, otherwise for 6 weeks.

When the second case attending Gisleham school was notified on 27th Sept. the school was closed for a week for disinfection, which was carried out according to the regulations.

I visited the School and reported to you unfavourably on a disused pond close to the school buildings and the Managers agreed to have it filled up in the Christmas holidays as it was more convenient and was better to be done when the children were not in the vicinity.

I think a more satisfactory plan might be arranged for the school drains which at present run into a ditch adjoining the school grounds.

As two of the first cases in Gisleham School, A.C. and M.C., came from the same family I arranged for the other children in the family to be swabbed and one was found to have the disease in a form only to be recognised by the microscope and she was removed to Hospital.

This second case directly infected one case and indirectly infected two children attending school otherwise the outbreak was stopped till 3rd Nov. when 3 in the same family were notified and when two other cases were notified the school was closed on 10th Nov. for a fortnight and then before being admitted to school the children were swabbed with the result that 2 members of a family were found to be "carriers" and that family was excluded. They could not be removed to Hospital at once but were isolated at home and the father and son who had to milk cows and deliver milk were boarded out till the "carriers" were removed to Hospital. All the other members of the family were swabbed and found to be free from infection.

WATER.

As 13 different water supplies were used, I think it can be excluded as a possible source of infection.

MILK.

As 11 different milk supplies were involved it cannot be suspected. I inquired at Lowestoft to see if their cases would assist me in suspecting any dairy, but found their milk supplies were also varied.

LAURENCE GIBSON,

Medical Officer of Health.



